Xcel Energy

Your Account Number	Date Due	Please Pay	Amount Enclosed
1014-675-598	08/31/2004	$314.32 Thank You!	

Please Return This Portion With Your Payment To:

Northern States Power Company

12006

AV 01 045752 98234B177 A**5DGT cyc: 004

TERRANCE P CROMEY
591 COUNTY ROAD B2 W
ROSEVILLE MN 55113-3519

P.O. BOX 9477
MPLS MN 55484-9477

21083104H1014675598H0000001200600000031432

Detach And Retain This Portion For Your Records

Questions: Call 24 Hours 7 Days A Week
Please Call: **1-800-895-4999**
Hearing Impaired: **1-800-895-4949**
Fax: 1-800-895-2895

or write to us at:
Northern States Power Company
PO BOX 8
EAU CLAIRE WI 54702-0008

For an average residential customer, 49% of your bill refers to power plant costs, 7% to high voltage line costs and 44% to the cost of local wires that are connected to your home.

Billing Summary

Residential	
Previous Balance 07/06	$191.42
No Payment Through 08/04	$.00
Late Payment Charge 08/04	$2.84
Balance As Of 08/04	**$194.26**
Current Energy Charges 08/04	$120.06
Total	**$314.32**

Averages for Billing Period	This Year	Last Year
Average Temperature	72*	72
Electric/kwh per Day	36.7	34.3
Cost per Day	$3.46	$3.18
Gas/therms per Day	.5	.5
Cost per Day	$0.68	$0.63

Current Charges

Electric Charges Usage Period: 07/05/04 to 08/03/04
Residential - Underground 29 Days

Basic Service Charge	$6.59
Energy Charge - Summer 1,063 kwh @ $.075894	$80.68
Resource Adjustment	$7.06
Subtotal	**$94.33**
State Tax @ 6.50 %	$6.13
Total Amount	**$100.46**

Meter Reading Information
Meter #0077132137

Company Reading on 08/03			46468
Company Reading on 07/05			45405
Total	**29 Days**	**kwh**	**1063**

Gas Charges Usage Period: 07/05/04 to 08/03/04
Pressure Correction Adjustment 14 ccf x 1.1000 = 15 ccf
Residential Firm Service 29 Days

Basic Service Charge	$6.50
Distribution Charge 15 therms @ $.168770	$2.53
Cost Of Gas 15 therms @ $.623613	$9.35
Resource Adjustment	$.02
Subtotal	**$18.40**
State Tax @ 6.50 %	$1.20
Total Amount	**$19.60**

Meter Reading Information
Meter #0000472528

Company Reading on 08/03			8882
Company Reading on 07/05			8868
Total	**29 Days**	**ccf**	**14**

*****Past Due Balance Notice*****
The due date pertains only to your current charges. The amount shown after Balance As Of remains past due.

Beginning this month, the renewable energy development costs are separated from the Fuel Clause Adjustment and are now included as a separate charge ($0.000415 per kWh) within the Resource Adjustment line on your bill. Visit www.xcelenergy.com to find more on Xcel Energy's renewable energy development.

Xcel Energy

TERRANCE P CROMEY
591 COUNTY ROAD B2 W
ROSEVILLE MN 55113

Account #: 1014-675-598

Next Scheduled Meter Reading Date	Date Due	Please Pay
09/02/2004	08/31/2004	$314.32

Please pay on or before the date due to avoid assessment of a late payment charge.

Exhibit 1

See back of bill for more information.

Statement Date: 08/04/04 G 6004

Xcel Energy

Your Account Number	Date Due	Please Pay	Amount Enclosed
1014-675-598	08/02/2004	$191.42 Thank You!	

Please Return This Portion With Your Payment To:

Northern States Power Company

P.O. BOX 9477
MPLS MN 55484-9477

AGKN 10829
cyc: 004
AV 01 038155 56743B138 A**5DGT

TERRANCE P CROMEY
591 COUNTY ROAD B2 W
ROSEVILLE MN 55113-3519

21080204H1014675598H000000108290000001914 2

Detach And Retain This Portion For Your Records

Questions: Call 24 Hours 7 Days A Week
Please Call: **1-800-895-4999**
Hearing Impaired: **1-800-895-4949**
Fax: 1-800-895-2895

or write to us at:
Northern States Power Company
PO BOX 8
EAU CLAIRE WI 54702-0008

For an average residential customer, 49% of your bill refers to power plant costs, 7% to high voltage line costs and 44% to the cost of local wires that are connected to your home.

Billing Summary

Residential	
Previous Balance 06/04	$81.91
No Payment Through 07/06	$.00
Late Payment Charge 07/06	$1.22
Balance As Of 07/06	**$83.13**
Current Energy Charges 07/06	$108.29
Total	**$191.42**

Averages for Billing Period	This Year	Last Year
Average Temperature	67*	70
Electric/kwh per Day	28.2	30.1
Cost per Day	$2.64	$2.78
Gas/therms per Day	.6	.5
Cost per Day	$0.74	$0.67

*** 3 Degrees Colder**

Current Charges

Electric Charges Usage Period: 06/03/04 to 07/05/04
Residential - Underground 32 Days

Basic Service Charge	$6.59
Energy Charge - Summer 901 kwh @ $.075894	$68.38
Resource Adjustment	$4.42
Subtotal	**$79.39**
State Tax @ 6.50 %	$5.16
Total Amount	**$84.55**

Meter Reading Information
Meter #0077132137

Company Reading on 07/05			45405
Company Reading on 06/03			44504
Total	**32 Days**	**kwh**	**901**

Gas Charges Usage Period: 06/03/04 to 07/05/04
Pressure Correction Adjustment 17 ccf x 1.1000 = 19 ccf
Residential Firm Service 32 Days

Basic Service Charge	$6.50
Distribution Charge 19 therms @ $.168770	$3.21
Cost Of Gas 19 therms @ $.661294	$12.56
Resource Adjustment	$.02
Subtotal	**$22.29**
State Tax @ 6.50 %	$1.45
Total Amount	**$23.74**

Meter Reading Information
Meter #0000472528

Company Reading on 07/05			8868
Company Reading on 06/03			8851
Total	**32 Days**	**ccf**	**17**

Starting with this bill, the Resource Adjustment charge includes costs required by Minnesota State Energy Policy (SEP) legislation adopted in 2003. For details, see the enclosed brochure. Questions? Contact us at 1-800-895-4999 or www.xcelenergy.com.

Xcel Energy

TERRANCE P CROMEY
591 COUNTY ROAD B2 W
ROSEVILLE MN 55113

Next Scheduled Meter Reading Date	Date Due	Please Pay
08/04/2004	08/02/2004	$191.42

Account #: 1014-675-598

Please pay on or before the date due to avoid assessment of a late payment charge.

See back of bill for more information.

Statement Date: 07/06/04 G 6236

1 2 3 4 11

Our Business Is Saving
Your Business Money.℠

CLUB MANAGER TIM KOTIRANTA
(651) 779 - 6535
Fax and Pull # (651)779-8915
WHITE BEAR LAKE, MN

10/22/04 10:58 8271 6309 001 1786

V MEMBER 101-10303265003

THANK YOU,
TERRANCE CHROMEY

715247	CHICKEN	14.88	N
52337	MILK 1% GAL	2.38	N
52337	MILK 1% GAL	2.38	N
452454	MIXED VEG	3.84	N
323576	PORK LOIN	14.12	N
319775	BR STRIPLOIN	27.38	N
320118	SPECIAL TRIM	12.76	N
320118	SPECIAL TRIM	10.89	N
464321	CANADIANSTK	4.24	N
28616	SAUSAGE 3 LB	5.87	N
135399	SALT QTR	7.13	N
641642	STRUDEL	3.88	N
459439	BROWNIE	6.78	N
645816	BISCUIT	3.37	N
	SUBTOTAL	119.90	
	TOTAL	119.90	
	CASH TEND	120.00	
	CHANGE DUE	0.10	

 # ITEMS SOLD 14

TC# 1184 1062 3340 2900 2182 5

Check out the savings on our Halloween candy and other selections.
10/22/04 11:00:17

Our Business Is Saving
Your Business Money.℠

CLUB MANAGER TIM KOTIRANTA
(651) 779 - 6535
Fax and Pull # (651)779-8915
WHITE BEAR LAKE, MN

10/16/04 11:24 5621 6309 003 1679

V MEMBER 101-10303265003

THANK YOU,
TERRANCE CHROMEY

692631	BOUNTY SAS	13.88	T
447942	TURTLE KIT	6.88	N
805638	MINUTE RICE	3.88	N
12855	PEARSON MNTS	7.54	T
52337	MILK 1% GAL	2.38	N
52337	MILK 1% GAL	2.38	N
52337	MILK 1% GAL	2.38	N
52337	MILK 1% GAL	2.38	N
318010	HANES TSHIRT	13.88	N
135399	SALT QTR	7.13	N
695417	CASCADE	6.88	T
715247	CHICKEN	14.88	N
319908	BEEF ROUNDS	13.74	N
658548	WINDEX COMBO	8.18	T
	SUBTOTAL	106.39	
TAX 1	6.500 %	2.37	
	TOTAL	108.76	
	CASH TEND	110.00	
	CHANGE DUE	1.24	

 # ITEMS SOLD 14

TC# 9957 5573 2745 3625 0821 8

Visit the Member Services desk to find out how to get the best boat prices.
10/16/04 11:24:48

Cub

Real people. Real values.

2100 Snelling Ave N
Roseville, MN 55113
651-633-9740
Pharmacy 651-633-9720
Store:3133

Cashier:PAIGE

09/25/04 06:25:52

GROCERY

BAKIN' MIRACLE	1112600115	1.85 FS
1 @ 4/ 9.00		
PEPSI COLA	1200000826	2.25 F1
C/H BRWN SUGAR	1580006432	1.39 FS
FMLY SZ VEL SHLL	2100065320	4.03 FS
NSTLE CHC MORSEL	2800021560	4.13 F1
NSTLE CHC MORSEL	2800021560	4.13 F1
ARM/HMR BAKE SDA	3320001155	.67 FS
MTML FRST FL 37OZ	4240091078	3.53 FS
MTML TSTO'S 39OZ	4240091278	4.93 FS
1 @ 2/ 4.00		
FRSTD BOX DONETT	4500001228	2.00 FS
1 @ 2/ 4.00		
FRSTD BOX DONETT	4500001228	2.00 FS
CMPBLS CRM OF CHK	5100001031	.99 FS
CMPBLS CRM/CELERY	5100001161	.99 FS
1 @ 4/ 5.00		
*CLASSIC CHKN	5100003885	1.25 FS
1 @ 4/ 5.00		
*CLASSIC CHKN	5100003885	1.25 FS
1 @ 4/ 5.00		
*CLASSIC CHKN	5100003885	1.25 FS
1 @ 4/ 5.00		
*CLASSIC CHKN	5100003885	1.25 FS

MEAT

Meat	5	8.08 FS
Meat	5	9.68 FS
Meat	5	13.89 FS
1 @ 2/ 8.00		
GLD PLMP THIGHS	2410586505	4.00 FS
1 @ 2/ 8.00		
GLD PLMP THIGHS	2410586505	4.00 FS
BF CHUCK TENDR S	20111700000	9.12 FS
PORK RIB CHOPS	20330400000	7.27 FS
PORK RIB CHOPS	20330400000	5.61 FS

PRODUCE

DOLE 3 LB SALAD	7143000810	3.99 FS

FROZEN

ORE IDA HSH BRWN	1312000833	2.17 FS
ORIDA WFL FR	1312001176	2.17 FS

DAIRY

CUB 2% MILK 2PK	4113048858	4.98 FS
CUB 2% MILK 2PK	4113048858	4.98 FS
C/F 16 CT CHEESE	7592530017	1.00 FS
C/F 16 CT CHEESE	7592530017	1.00 FS

SUBTOTAL	119.83
6.5% State Tax	.68
TOTAL TAX	.68
TOTAL	**120.51**
Cash TENDER	122.00

[illegible]

[illegible]

[illegible]

COUPON [illegible] PRICE [illegible]

	SUBTOTAL	22.99
6.500%	TAX	[illegible]
	TOTAL	22.99

[illegible]

THANK YOU FOR SHOPPING PAYLESS!
PLEASE KEEP RECEIPT FOR RETURNS
SHOES ONLINE ANYTIME WWW.PAYLESS.COM

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$$
FOR $2 OFF YOUR NEXT PURCHASE,
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GIVE US YOUR OPINION. THANKS!
ACCESS CODE # 456554704

COUPON # _____
PAYLESS SHOESOURCE
$$

JCPENNEY #0496
ROSEDALE MALL
1700 WEST COUNTY RD B-2
ROSEVILLE MN 55113
651-631-3330

10/09/04 02:52 PM 9007 0496/420 631

832/3148/010009	DCC LS SOLID ZIP SHT	
	QTY 1	30.00
SALE DISC	12.01 -	
YOUR PRICE		17.99L
842/5431/010907	LS CREWNECK TEE-FF	
	QTY 1	18.00
BG DISC	17.00 -	
YOUR PRICE		1.00L
842/5427/030307	SJB LS PRT CRWNK TEE	
	QTY 1	18.00L
844/9252/030304	TWILL PANT - MA	
UPC # 651056991264		
VALUE RIGHT	QTY 1	29.99
SALE DISC	3.00 -	
YOUR PRICE		26.99L
831/2520/010107	L/S V-WVN CLR/CF	
	QTY 1	36.00
SALE DISC	18.01 -	
YOUR PRICE		17.99L
844/7970/020904	GV EVA BLTD TRSR	
UPC # 822980492794		
	QTY 1	40.00
SALE DISC	12.01 -	
YOUR PRICE		27.99L
SUBTOTAL		109.96
SALES TAX	6.500% 55113	.00

XXXXXXXXXXXX2239/XXXX/00/M
VISA 109.96

TTL 10/09/04 109.96

YOUR TOTAL SAVINGS TODAY 62.03 -

CARDHOLDER ACKNOWLEDGES RECEIPT OF GOODS/SERVICES IN THE AMOUNT SHOWN AND AGREES TO PAY FOR THEM ACCORDING TO CREDIT CONTRACT WITH CARD ISSUER.

Visit our website at
www.jcpenney.com

KEEP THIS SLIP FOR STATEMENT VERIFICATION
CUSTOMER COPY

RCT# 0496 100904 420 9007 8

Record of Prescriptions for:
TERRANCE P. CHROMEY
04/25/03 thru 10/25/04

St. Paul
205 S Wabasha St.
St. Paul, MN 55107
952/833-0358

Date: 10/25/04
Time: 10:26:37

Name: TERRANCE P. CHROMEY
Addr: 591 CO. RD B2 WE.
ROSEVILLE, MN 55113

Birth: 01/17/1949
Sex: Male
Phone: 651/493-9419
MRN: 01131023

Allergies: None

Rx Number	Rf	Date Written	Refill Date	Medication/NDC/Doctor	Days Elap	Qty	Ins Cost	Pat Cost
13241960	1	09/07/04	10/20/04	NAPROXEN TAB 500MG 67253-0622-50 Dr. KOOPMEINERS, MICHAEL B	43	60	0.00	8.00
13241960		09/07/04	09/07/04	NAPROXEN TAB 500MG 67253-0622-50 Dr. KOOPMEINERS, MICHAEL B	0	60	0.00	8.00
13252152		10/19/04	10/19/04	PRILOSEC OTC TAB 20MG 37000-0455-04 Dr. KOOPMEINERS, MICHAEL B	0	0	0.00	0.00
13250294	1	10/11/04	10/15/04	LIPITOR TAB 20MG 00071-0156-23 Dr. KOOPMEINERS, MICHAEL B	4	30	0.00	8.00
13250294		10/11/04	10/11/04	LIPITOR TAB 20MG 00071-0156-23 Dr. KOOPMEINERS, MICHAEL B	0	0	0.00	0.00
13251508		10/15/04	10/15/04	PRILOSEC OTC TAB 20MG 37000-0455-04 Dr. KOOPMEINERS, MICHAEL B	0	30	0.00	8.00
16768939		10/07/04	10/07/04	APAP/CODEINE TAB 300-30MG 00406-0484-01 Dr. KOOPMEINERS, MICHAEL B	0	12	0.00	6.65
13167855	10	10/15/03	09/27/04	PRILOSEC OTC TAB 20MG 37000-0455-04 Dr. KOOPMEINERS, MICHAEL B	30	0	0.00	0.00
13167855	9	10/15/03	08/28/04	PRILOSEC OTC TAB 20MG 37000-0455-04 Dr. KOOPMEINERS, MICHAEL B	34	30	0.00	8.00
13167855	8	10/15/03	07/25/04	PRILOSEC OTC TAB 20MG 37000-0455-04 Dr. KOOPMEINERS, MICHAEL B	47	30	0.00	8.00
13167855	7	10/15/03	06/08/04	PRILOSEC OTC TAB 20MG 37000-0455-03 Dr. KOOPMEINERS, MICHAEL B	30	30	0.00	8.00
13167855	6	10/15/03	05/09/04	PRILOSEC OTC TAB 20MG 37000-0455-03 Dr. KOOPMEINERS, MICHAEL B	40	30	0.00	8.00
13167855	5	10/15/03	03/30/04	PRILOSEC OTC TAB 20MG 37000-0455-03 Dr. KOOPMEINERS, MICHAEL B	33	30	0.00	8.00
13167855	4	10/15/03	02/26/04	PRILOSEC OTC TAB 20MG 37000-0455-03 Dr. KOOPMEINERS, MICHAEL B	37	30	0.00	8.00
13167855	3	10/15/03	01/20/04	PRILOSEC OTC TAB 20MG 37000-0455-03 Dr. KOOPMEINERS, MICHAEL B	22	28	0.00	8.00
13167855	2	10/15/03	12/29/03	PRILOSEC OTC TAB 20MG 37000-0455-03 Dr. KOOPMEINERS, MICHAEL B	28	28	0.00	8.00
13167855	1	10/15/03	12/01/03	PRILOSEC OTC TAB 20MG 37000-0455-03 Dr. KOOPMEINERS, MICHAEL B	47	28	0.00	8.00
13167855		10/15/03	10/15/03	PRILOSEC OTC TAB 20MG 37000-0455-03 Dr. KOOPMEINERS, MICHAEL B	0	28	0.00	8.00
13240484		08/31/04	08/31/04	ATENOLOL TAB 50MG 00093-0752-10 Dr. KOOPMEINERS, MICHAEL B	0	0	0.00	0.00
13161848	8	09/20/03	08/28/04	LIPITOR TAB 20MG 00071-0156-23 Dr. RILEY, DANIEL N	39	30	0.00	8.00
13161848	7	09/20/03	07/20/04	LIPITOR TAB 20MG 00071-0156-23 Dr. RILEY, DANIEL N	62	30	0.00	8.00

Record of Prescriptions for:
TERRANCE P. CHROMEY
04/25/03 thru 10/25/04

St. Paul
205 S Wabasha St.
St. Paul, MN 55107
952/833-0358

Date: 10/25/04
Time: 10:26:37

Name: TERRANCE P. CHROMEY
Addr: 591 CO. RD B2 WE.
ROSEVILLE, MN 55113

Birth: 01/17/1949
Sex: Male
Phone: 651/493-9419
MRN: 01131023

Allergies: None

Rx Number	Rf	Date Written	Refill Date	Medication/NDC/Doctor	Days Elap	Qty	Ins Cost	Pat Cost
13161848	6	09/20/03	05/19/04	LIPITOR TAB 20MG	58	30	0.00	8.00
				00071-0156-23 Dr. RILEY, DANIEL N				
13161848	5	09/20/03	03/22/04	LIPITOR TAB 20MG	33	30	0.00	8.00
				00071-0156-23 Dr. RILEY, DANIEL N				
13161848	4	09/20/03	02/18/04	LIPITOR TAB 20MG	28	30	0.00	8.00
				00071-0156-23 Dr. RILEY, DANIEL N				
13161848	3	09/20/03	01/21/04	LIPITOR TAB 20MG	29	30	0.00	8.00
				00071-0156-23 Dr. RILEY, DANIEL N				
13161848	2	09/20/03	12/23/03	LIPITOR TAB 20MG	51	30	0.00	8.00
				00071-0156-23 Dr. RILEY, DANIEL N				
13161848	1	09/20/03	11/02/03	LIPITOR TAB 20MG	43	30	0.00	8.00
				00071 0156 23 Dr. RILEY, DANIEL N				
13161848		09/20/03	09/20/03	LIPITOR TAB 20MG	0	30	0.00	8.00
				00071-0156-23 Dr. RILEY, DANIEL N				
13181996	4	12/15/03	08/28/04	ATENOLOL TAB 50MG	39	90	0.00	24.00
				00093-0752-10 Dr. KOOPMEINERS, MICHAEL B				
13181996	3	12/15/03	07/20/04	ATENOLOL TAB 50MG	121	0	0.00	0.00
				00093-0752-10 Dr. KOOPMEINERS, MICHAEL B				
13181996	2	12/15/03	03/21/04	ATENOLOL TAB 50MG	97	90	0.00	24.00
				00093-0752-10 Dr. KOOPMEINERS, MICHAEL B				
13181996	1	12/15/03	12/15/03	ATENOLOL TAB 50MG	0	90	0.00	19.01
				00093-0752-10 Dr. KOOPMEINERS, MICHAEL B				
13181996		12/15/03	12/15/03	ATENOLOL TAB 50MG	0	0	0.00	0.00
				00093-0752-10 Dr. KOOPMEINERS, MICHAEL B				
13230511		07/15/04	07/15/04	NITROQUICK SUB 0.4MG	0	100	0.00	8.00
				58177-0324-04 Dr. KOOPMEINERS, MICHAEL B				
13222749		06/08/04	06/08/04	NAPROXEN TAB 500MG	0	60	0.00	8.00
				55370-0141-07 Dr. KOOPMEINERS, MICHAEL B				
13173921	3	11/11/03	03/21/04	NAPROXEN TAB 250MG	60	60	0.00	8.00
				00591-0821-01 Dr. ARDELEANU, OVIDIU				
13173921	2	11/11/03	01/21/04	NAPROXEN TAB 250MG	71	60	0.00	8.00
				00591-0821-01 Dr. ARDELEANU, OVIDIU				
13173921	1	11/11/03	11/11/03	NAPROXEN TAB 250MG	0	60	0.00	8.00
				00591-0821-01 Dr. ARDELEANU, OVIDIU				
13173921		11/11/03	11/11/03	NAPROXEN TAB 250MG	0	0	0.00	0.00
				00591-0821-01 Dr. ARDELEANU, OVIDIU				
13162985	2	09/25/03	12/13/03	LISINOPRIL TAB 20MG	41	30	0.00	8.00
				00172-3760-60 Dr. HUEBSCH, JACQUELYN N				
13162985	1	09/25/03	11/02/03	LISINOPRIL TAB 20MG	38	30	0.00	8.00
				00172-3760-60 Dr. HUEBSCH, JACQUELYN N				
13162985		09/25/03	09/25/03	LISINOPRIL TAB 20MG	0	30	0.00	8.00
				00172-3760-60 Dr. HUEBSCH, JACQUELYN N				

Record of Prescriptions for:
TERRANCE P. CHROMEY
04/25/03 thru 10/25/04

St. Paul
205 S Wabasha St.
St. Paul, MN 55107
952/833-0358

Date: 10/25/04
Time: 10:26:37

Name: TERRANCE P. CHROMEY
Addr: 591 CO. RD B2 WE.
ROSEVILLE, MN 55113

Birth: 01/17/1949
Sex: Male
Phone: 651/493-9419
MRN: 01131023

Allergies: None

Rx Number	Rf	Date Written	Refill Date	Medication/NDC/Doctor	Days Elap	Qty	Ins Cost	Pat Cost
13177344	2	11/25/03	12/13/03	NITROQUICK SUB 0.4MG	18	100	0.00	13.50
				58177-0324-04 Dr. KOOPMEINERS, MICHAEL B				
13177344	1	11/25/03	11/25/03	NITROQUICK SUB 0.4MG	0	0	0.00	0.00
				58177-0324-04 Dr. KOOPMEINERS, MICHAEL B				
13177344		11/25/03	11/25/03	NITROQUICK SUB 0.4MG	0	0	0.00	0.00
				58177-0324-04 Dr. KOOPMEINERS, MICHAEL B				
16722846	1	09/25/03	10/15/03	ALBUTEROL AER 90MCG	20	17	0.00	8.00
				59930-1560-01 Dr. KOOPMEINERS, MICHAEL B				
16722846		09/25/03	09/25/03	ALBUTEROL AER 90MCG	0	17	0.00	8.00
				59930-1560-01 Dr. KOOPMEINERS, MICHAEL B				
16722844		09/25/03	09/25/03	ADVAIR DISKU MIS 250/50	0	60	0.00	8.00
				00173-0696-00 Dr. KOOPMEINERS, MICHAEL B				
16722845		09/25/03	09/25/03	PREDNISONE TAB 20MG	0	18	0.00	6.42
				00054-4729-25 Dr. KOOPMEINERS, MICHAEL B				
16721362		09/15/03	09/15/03	OMEPRAZOLE CAP 20MG CR	0	30	0.00	8.00
				62175-0118-32 Dr. KOOPMEINERS, MICHAEL B				
16694995	3	02/07/03	09/08/03	ATENOLOL TAB 50MG	109	90	0.00	19.01
				00093-0752-10 Dr. RILEY, DANIEL N				
16694995	2	02/07/03	05/22/03	ATENOLOL TAB 50MG	104	90	0.00	19.01
				00093-0752-10 Dr. RILEY, DANIEL N				
16712611	3	06/26/03	09/01/03	CIMETIDINE TAB 800MG	34	60	0.00	8.00
				50111-0552-02 Dr. KOOPMEINERS, MICHAEL B				
16712611	2	06/26/03	07/29/03	CIMETIDINE TAB 800MG	26	60	0.00	8.00
				50111-0552-02 Dr. KOOPMEINERS, MICHAEL B				
16712611	1	06/26/03	07/03/03	CIMETIDINE TAB 800MG	7	60	0.00	8.00
				50111-0552-01 Dr. KOOPMEINERS, MICHAEL B				
16712611		06/26/03	06/26/03	CIMETIDINE TAB 800MG	0	0	0.00	0.00
				50111-0552-01 Dr. KOOPMEINERS, MICHAEL B				
16701062	4	03/25/03	09/02/03	NAPROXEN TAB 250MG	28	60	0.00	8.00
				00591-0821-01 Dr. KOOPMEINERS, MICHAEL B				
16701062	3	03/25/03	08/05/03	NAPROXEN TAB 250MG	7	60	0.00	8.00
				00591-0821-01 Dr. KOOPMEINERS, MICHAEL B				
16701062	2	03/25/03	07/29/03	NAPROXEN TAB 250MG	126	0	0.00	0.00
				00591-0821-01 Dr. KOOPMEINERS, MICHAEL B				
13155536		08/23/03	08/23/03	LISINOPRIL TAB 10MG	0	30	0.00	8.00
				00172-3759-70 Dr. HUEBSCH, JACQUELINE A				
16697929	5	02/28/03	08/17/03	LIPITOR TAB 20MG	48	30	0.00	8.00
				00071-0156-23 Dr. RILEY, DANIEL N				
16697929	4	02/28/03	06/30/03	LIPITOR TAB 20MG	44	30	0.00	8.00
				00071-0156-23 Dr. RILEY, DANIEL N				
16697929	3	02/28/03	05/17/03	LIPITOR TAB 20MG	55	30	0.00	8.00
				00071-0156-23 Dr. RILEY, DANIEL N				

Record of Prescriptions for:
TERRANCE P. CHROMEY
04/25/03 thru 10/25/04

St. Paul
205 S Wabasha St.
St. Paul, MN 55107
952/833-0358

Date: 10/25/04
Time: 10:26:37

Name: TERRANCE P. CHROMEY
Addr: 591 CO. RD B2 WE.
ROSEVILLE, MN 55113

Birth: 01/17/1949
Sex: Male
Phone: 651/493-9419
MRN: 01131023

Allergies: None

Rx Number	Rf	Date Written	Refill Date	Medication/NDC/Doctor	Days Elap	Qty	Ins Cost	Pat Cost
16717797		08/13/03	08/13/03	ISOSORB MONO TAB 30MG ER 58177-0222-04 Dr. MATTHEWS, CATHERINE T	0	30	0.00	8.00
16717798		08/13/03	08/13/03	AVELOX TAB 400MG 00026-8581-69 Dr. MATTHEWS, CATHERINE T	0	10	0.00	8.00
16706869	4	05/09/03	07/22/03	NAPROXEN TAB 500MG 55370-0141-07 Dr. DUNKLEE, TERRENCE	33	30	0.00	8.00
16706869	3	05/09/03	06/19/03	NAPROXEN TAB 500MG 55370-0141-07 Dr. DUNKLEE, TERRENCE	7	30	0.00	8.00
16706869	2	05/09/03	06/12/03	NAPROXEN TAB 500MG 55370-0141-07 Dr. DUNKLEE, TERRENCE	16	30	0.00	8.00
16706869	1	05/09/03	05/27/03	NAPROXEN TAB 500MG 55370-0141-07 Dr. DUNKLEE, TERRENCE	18	0	0.00	0.00
16706869		05/09/03	05/09/03	NAPROXEN TAB 500MG 55370-0141-07 Dr. DUNKLEE, TERRENCE	0	0	0.00	0.00
16686863	6	12/04/02	05/17/03	CIMETIDINE TAB 800MG 50111-0552-02 Dr. RILEY, DANIEL N	32	60	0.00	8.00
13108503	1	01/25/03	05/08/03	NAPROXEN TAB 500MG 55370-0141-07 Dr. AFGARSHE, MOHAMUD D	103	30	0.00	8.00

Totals -> 72 Count $0.00 Ins Cost $539.60 Pat Cost

Holiday Stationstore
Stop the Difference

CREDIT CARD SALE
Holiday
10/20/04 TIME: 04:07
Store#:0335
Terminal#:0001
A: 1205
CC#XXXXXXXXXX8617
DONNA CHROMEY
/

PUMP# 13 CREDIT/SELF
UNLEADED @ $ 1.799/G
VOLUME 5.918 GAL

GAS TOTAL $ 10.65
TOTAL $ 10.65

TRN#: 040706183
APPROVAL: 010880

Thank You for
Choosing Holiday!

Holiday Stationstore
Stop the Difference

CREDIT CARD SALE
Holiday
10/04/04 TIME: 04:04
Store#:0335
Terminal#:0001
A: 1205
CC#XXXXXXXXXX8617
DONNA CHROMEY
/

PUMP# 13 CREDIT/SELF
UNLEADED @ $ 1.839/G
VOLUME 5.980 GAL

GAS TOTAL $ 11.00
TOTAL $ 11.00

TRN#: 040429180
APPROVAL: 006028

Thank You for
Choosing Holiday!

KUBES FAMILY
SPUR

STATION NUMBER
27460517001

DATE: 10/09/04
TIME: 19:40
DONNA M CHROMEY
VS
CREDIT

PUMP# 7 UNLD REG
GALLONS 10.756
@ $1.859/GAL
FUEL $20.00

TOTAL $20.00

20643
AUTH# 035164

NON OXY GAS FOR
MOWERS, TRIMMERS
ETC. WE HAVE IT !!

Holiday Stationstore
Stop the Difference

CREDIT CARD SALE
Holiday
10/19/04 TIME: 04:10
Store#:0335
Terminal#:0001
0808
XXXXXXXXXX2239
DONNA M CHROMEY
/

PUMP# 13 CREDIT/SELF
UNLEADED @ $ 1.919/G
VOLUME 10.941 GAL

GAS TOTAL $ 21.00
TOTAL $ 21.00

REF#: 041023342
APPROVAL: 012725

Thank You for
Choosing Holiday!

WELCOME TO BRAUSEN
FAMILY STORES

SHELL
2164 N DALE ST
ROSEVILLE
RT# 93002840516 MN

09/18/04 10:37:17
DONNA CHROMEY
VISA
XXXX XXXX XXXX ACCT# 8617

RCPT# 5-5757
INV# 0274035
AUTH# 00006829

PUMP# 3
UNLEAD
SELF 5.559G
PRICE/GAL $1.799

FUEL TOTAL $10.00

TOTAL $10.00

THANK YOU
STOP AGAIN

Holiday Stationstore
Stop the Difference

CREDIT CARD SALE
Holiday
10/14/04 TIME: 04:08
Store#:0335
Terminal#:0001
1205
XXXXXXXXXX8617
DONNA CHROMEY
/

PUMP# 13 CREDIT/SELF
UNLEADED @ $ 1.999/G
VOLUME 9.005 GAL

GAS TOTAL $ 18.00
TOTAL $ 18.00

REF#: 040827376
APPROVAL: 014131

Thank You for
Choosing Holiday!

car X® Auto Service

Brakes • Exhaust • Tires • Ride Control
Steering & Suspension • A/C • Batteries • CV Drive Axles
Tune Up • Maintenance • Fluid Services • Trailer Hitches

DOCUMENT CONTROL #: 4 09595

Invoice #: 48104
Estimate #: 71508
Date: 9/17/2004 18:15

INVOICE

CAR-X - MAPLEWOOD
2128 RICE ST.

MAPLEWOOD MN 55113
(651)488-9422

WHILE WORKING WE NOTICED:
CHECK BRAKES

Customer Id#: D04170
Customer Name: TERRY CHROMEY
Customer Addr: 591 CO RD B2 W

City/St/Zip: ROSEVILLE MN 55113
Home Phone #: (651)493-9419
Work Phone #:

Reason:

Year: 2001
Make: HONDA
Model: ACCORD EX
Engine: 2.3
Lic#: MTV 598 State: MN
Mileage In: 44345 Out: 44345
VIN #:

PAGE: 1

Qty	Part No	Loc	PM	Description	Comments/Guarantee	Part	Labor	Extended
	BRAKE							
1	BR DISCOUNT			BRAKE DISCOUNT		20.66-		20.66-
		TOTAL OVERALL				20.66-		20.66-
1	4970999	F		CERAMIC ADD CHG		20.96		20.96
		TOTAL FRONT				20.96		20.96
1	PGD5370S	B		PG DISC PAD		66.57		66.57
1	BS2	B		DISC W/PRK CABLE			55.00	55.00
				Install new pads. clean & lubricate caliper slides. torque wheels and road test vehicle.				
2	MR	B		MACHINE ROTOR			18.00	36.00
		TOTAL BACK				66.57	91.00	157.57
		TOTAL BRAKE						157.87
	MISCELLANEOUS							
1	EF			ENVIRONMENT/DISPO		2.00		2.00
1	SS			SHOP SUPPLIES		6.00		6.00
1	LOF			LUBE/OIL/FILTER		14.95		14.95
1	LOF L			LOF LABOR			10.00	10.00
1	AIRFTR			AIR FILTER		20.88		20.88
		TOTAL MISCELLANEOUS						53.83

hereby acknowledge receipt of the service and parts shown on this invoice.

CUSTOMER SIGNATURE

Thank you for coming to CAR-X.

THANK YOU FOR GIVING CAR-X THE OPPORTUNITY TO SERVE YOU!
WE APPRECIATE YOUR BUSINESS.
ROBERT AND STAFF
PLEASE PHONE COMMENTS TO (952-906-0909)

PARTS TOTAL	110.70
SALES TAX	7.20
LABOR TOTAL	101.00
GRAND-TOTAL	218.90
CASH	218.90

ALL DARIN J

INVOICE COPY - MAPLEWOOD INVOICE

Valvoline INSTANT OIL CHANGE

CARS. WE KNOW 'EM. WE LOVE 'EM.™

Get Your Vehicle's VIOC Service History at:

www.vioc.com

Gift Certificates Are Available Year-Round.

MVP Maximum Vehicle Performance ®

Invoice No.
Store Info 139259 R Y 03/13/2004 15:59
EA0002 Mgr:STEVE MYHRE
2698 RICE ST.
LITTLE CANADA, MN 55113
(651)482-0606

TERRANCE PAUL CHROMEY
591 CO. RD. B2W
ROSEVILLE, MN 55113

MVP NUMBER	ODOMETER	PREV. MILES	PREV. DATE
1337121576	95460	0	/ /

YEAR	MAKE & MODEL
1997	SATURN COUPE

ENGINE
4 CYL. 1.9L FI (SOHC)

Sign (X)_____

SERVICE / PRODUCT	STATUS	ITEM NUMBER	QUANTITY	UNIT	AMOUNT
OIL CHANGE	ADDED	5W30B	4.00	QT	29.99
VALVOLINE OIL FILTER V025	REPLACED	V025	1.00	EACH	
CHASSIS LUBE WITH SERVICE	SEALED	LUBE			
PLUG&GASKET	CHECKED				
TIRE PRESSURE	CHECKED	FRONT 35 LBS	REAR 35 LBS		
BRAKE FLD	CHECKED				
POWER STEERING	CHECKED				
ANTIFREEZE	CHECKED	TEMP -34			
WIND. WASH FLD	ADDED TO				
BATTERY	SEALED				
AIR FILTER	CHECKED				
FUEL FILTER	CHECKED				
PCV VALVE P52248	CHECKED				
BREATHER	CHECKED				
WIND. WIPERS	CHECKED				
COOLING SYSTEM	CHECKED				
TRANSMISSION	CHECKED				
SERPENTINE BELT REPLACE	CHECKED				
ENVIRONMENTAL SERVICE FEE	MISC	ESF	1.00	EACH	1.09

Super Pro Certified Services performed by: JESSE, KENG

SUBTOTAL	31.08
SALES TAX	1.34
TOTAL	32.42
/CASH	32.42
AMT TENDERED	40.00
CHANGE	7.58

WISCONSIN CUSTOMERS: Motor vehicle repair practices are regulated by chapter ATCP 132 Wis. Adm. Code, administered by the Bureau of Consumer Protection, Wisconsin Dept. of Agriculture, Trade and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-8911. **BRAKE FLUID:** VIOC checks but does not add brake fluid. Auto manufacturers recommend a mechanical check for excessive wear or leaks if fluid is low.

COMMENT SECTION BELOW:

THANK YOU!
We appreciate your business. See the back for our 100% Satisfaction Guarantee.

Valvoline INSTANT OIL CHANGE

CARS. WE KNOW 'EM. WE LOVE 'EM.™

Get Your Vehicle's VIOC Service History at:

www.vioc.com

Gift Certificates Are Available Year-Round.

MVP Maximum Vehicle Performance®

Invoice No. 140721 R Y 05/22/2004 08:09
Store Info EA0002 Mgr:STEVE MYHRE
2698 RICE ST.
LITTLE CANADA, MN 55113
(651)482-0606

TERRANCE PAUL CHROMEY
591 CO. RD. B2W
ROSEVILLE, MN 55113

MVP NUMBER	ODOMETER	PREV. MILES	PREV. DATE
1337121576	98376	95460	03/13/2004

YEAR	MAKE & MODEL
1997	SATURN COUPE

ENGINE
4 CYL. 1.9L FI (SOHC)

Sign (X)_____

SERVICE / PRODUCT	STATUS	ITEM NUMBER	QUANTITY	UNIT	AMOUNT
OIL CHANGE	ADDED	5W30B	4.00	QT	29.99
VALVOLINE OIL FILTER V025	REPLACED	V025	1.00	EACH	
CHASSIS LUBE WITH SERVICE	SEALED	LUBE			
PLUG&GASKET	CHECKED				
TIRE PRESSURE	CHECKED	FRONT 35 LBS REAR 35 LBS			
BRAKE FLD	CHECKED				
POWER STEERING	CHECKED				
ANTIFREEZE	CHECKED	TEMP -34			
WIND. WASH FLD	ADDED TO				
BATTERY	SEALED				
AIR FILTER	CHECKED	(THANK YOU FOR CHOOSING US)			
FUEL FILTER	CHECKED	(VISIT OUR WEBSITE AT WWW.VIOC.COM)			
PCV VALVE P52248	CHECKED	(CUSTOMER DECLINED SOME SERVICE CHECKS)			
WIND. WIPERS	CHECKED				
COOLING SYSTEM	CHECKED				
TRANSMISSION	CHECKED				
SERPENTINE BELT REPLACE	CHECKED				
ENVIRONMENTAL SERVICE FEE	MISC	ESF	1.00	EACH	1.09

Super Pro Services performed by: JESSE, ODILON
JOSE

SUBTOTAL	31.08
SALES TAX	1.34
TOTAL	32.42
/CASH	32.42
AMT TENDERED	40.00
CHANGE	7.58

WISCONSIN CUSTOMERS: Motor vehicle repair practices are regulated by chapter ATCP 132 Wis. Adm. Code, administered by the Bureau of Consumer Protection, Wisconsin Dept. of Agriculture, Trade and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-8911. **BRAKE FLUID:** VIOC checks but does not add brake fluid. Auto manufacturers recommend a mechanical check for excessive wear or leaks if fluid is low.

COMMENT SECTION BELOW:

THANK YOU!
We appreciate your business. See the back for our 100% Satisfaction Guarantee.

Valvoline Vehicle Service History: www.vioc.com MVP
CARS. WE KNOW 'EM. WE LOVE 'EM.™

MVP Number
Oil Used Last
NEXT Service Date

car X® Auto Service

Brakes • Exhaust • Tires • Ride Control
Steering & Suspension • A/C • Batteries • CV Drive Axles
Tune Up • Maintenance • Fluid Services • Trailer Hitches

DOCUMENT CONTROL #: 4 09597

Invoice #: 48106
Estimate #: 71510
Date: 9/18/2004 10:23

INVOICE

CAR-X - MAPLEWOOD
2128 RICE ST.

MAPLEWOOD MN 55113
(651)488-9422

WHILE WORKING WE NOTICED:

Customer Id#: D04170
Customer Name: TERRY CHROMEY
Customer Addr: 591 CO RD B2 W

City/St/Zip: ROSEVILLE MN 55113
Home Phone #: (651)493-9419
Work Phone #:

Reason:

Year: 1997
Make: SATURN
Model: SL1
Engine: 1.9
Lic#: FJN549 State: MN
Mileage In: 101778 Out: 101778
VIN #:

PAGE: 1

Qty	Part No	Loc	PM	Description	Comments/Guarantee	Part	Labor	Extended
	MISCELLANEOUS							
1	LOF			LUBE/OIL/FILTER		14.95		14.95
1	LOF L			LOF LABOR			10.00	10.00
1	SS			SHOP SUPPLIES		1.50		1.50
1	EF			ENVIRONMENT/DISPO		2.00		2.00
				TOTAL MISCELLANEOUS				28.45
PARTS BELOW WERE RECOMMENDED FOR PM : CUSTOMER DECLINED								
1	CLAR	B	+	CLEAN ADJ REAR BK			15.00	15.00
2	MI		+	P185/70SR14 TIRES		61.00		122.00
2	M/B/S		+	MT/BAL/STEEL RIM			11.95	23.90
2	STEM		+	VALVE STEM		2.00		4.00
2	TD		+	TIRE DISPOSAL			2.00	4.00

ıereby acknowledge receipt of the service and parts ıown on this invoice.

JSTOMER SIGNATURE

Thank you for coming to CAR-X.

THANK YOU FOR GIVING CAR-X THE OPPORTUNITY TO SERVE YOU!
WE APPRECIATE YOUR BUSINESS.
ROBERT AND STAFF
PLEASE PHONE COMMENTS TO (952-906-0909)

PARTS TOTAL	18.45
SALES TAX	1.20
LABOR TOTAL	10.00
GRAND-TOTAL	29.65
CASH	29.65

ALL DARIN J

INVOICE COPY - WHITE CANARY INVOICE

for Both Cars

Payment schedule

Sep 16, 2004	$285.74	Jan 16, 2005	$438.55
Oct 16, 2004	$439.05	Feb 16, 2005	$438.56
Nov 16, 2004	$438.55		
Dec 16, 2004	$438.55		

An installment fee of $1.00 has been included in each payment.

Premium discounts

You received discounts because there is more than one vehicle on the policy and one or more vehicles have an active anti-theft device. These discounts have been calculated into your premium.

PMIDC04U 000464 009 C 008 031 0000000006000 2441000000308

PROGRESSIVE®

WESTERN INS AGCY INC
1740 RICE ST 200
ST PAUL, MN 55113

Policy number: 43405402-1
Progressive Northern Insurance Company
August 31, 2004
Policy Period: Sep 16, 2004 - Mar 16, 2005
Page 1 of 2

TERRY P CHROMEY
DONNA M CHROMEY
591 COUNTY ROAD B2 W
ROSEVILLE, MN 55113

personal.progressive.com
Make payments, check billing activity, make policy changes or check status of a claim

800-999-8781
Automated Billing Inquiry
Make a credit card payment, check last payment received or due date of next payment.

651-489-4119
WESTERN INS AGCY INC
Contact your agent during business hours.

800-888-7764
Policy Services
Call when your agent is not available to make policy changes 24 hours a day, 7 days a week. **Se habla español.**

Auto Insurance Renewal

Your payment is scheduled for withdrawal

Thank you for being a Progressive customer.
We appreciate your business and look forward to serving you in the future. To maintain continuous coverage, your payment must be received or postmarked by the due date.

Renewal policy premium	$7,473.00
Amount due	**$285.74**
Scheduled for withdrawal on	**September 16, 2004**

For your convenience, the payment to renew your policy will be withdrawn from your account on the date shown above. If you do not want the renewal payment to be automatically withdrawn, please contact us by phone 5 to 7 days before that date.

Discounts are included in your renewal policy premium. See page 2.

Please see reverse side for additional information.

Continued on back

Automatic withdrawal is scheduled

Amount due	**$285.74**
Is scheduled for withdrawal on	**September 16, 2004**

Policy number: 43405402-1
Policyholders: TERRY P CHROMEY
DONNA M CHROMEY

If you wish to change your method of payment, please call Policy Services at 800-888-7764.

PROGRESSIVE
PO BOX 4640
CAROL STREAM IL 60197-9601

Do not write below this section of coupon.
54-16599 Form 6482 (09/01)
Renewal Bill

0535434054021220 55 0028574 0247400 0000000 0000000 00A7091L0405