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### Description



#### Inspiron 17 7000 Series Touch

Date & Time: September 09, 2014 6:19 PM CST

#### SYSTEM COMPONENTS

Inspiron 17 7000 Series Touch	Qty	3
Inspiron 17, 7737, Windows 8.1 (64Bit) English	Unit Price	\$1,658.99
<b>Dell Inspiron 17 7000 Series</b>		<b>- \$1,078.23</b>

price includes \$359.41 instant discount.

Limited Time Offer!

This offer may qualify for up to \$50 in bonus coupon savings.

[Click to view coupons](#)

Limited Time Offer

12 months special financing on new computer purchases \$1199 or more with Dell Preferred Account!  
Limited Time Offer!

**Catalog Number:** 29 FNCWJ1904B

Module	Description	<a href="#">Show Details</a>
Inspiron 17 7000 Series	Inspiron 17, 7737	
Operating System	Windows 8.1 (64Bit) English	
Memory	16GB 2 DIMM (2x8GB) DDR3L 1600Mhz	
Keyboard	Backlit Keyboard	
Video Card	NVIDIA® GeForce® GT 750M 2GB GDDR5	
Driver	Intel® Dual Band Wireless-N 7260 Driver	
Hard Drive	1TB 5400 rpm SATA Hybrid Hard Drive with 8GB Cache	
CD ROM/DVD ROM	Tray load DVD Drive (Reads and Writes to DVD/CD)	
Wireless	Intel® Dual Band Wireless-N 7260 2x2 AGN + Bluetooth 4.0	
Cable	US Power Cord	

Documentation/Disks	MUI Documentation
Support for Your PC	2 Year Enhanced Support
Systems Management	Platform Quickset
Placemat	Windows 8.1 Documentation
Retail Software	Dell.com Order
Shipping SKU's	Shipping Material
Primary Battery	4-cell Lithium Ion (58WHr) Battery
Energy Efficiency Options	Energy Star Compliant
Processor	4th Generation Intel® Core™ i7-4510U processor (4M Cache, up to 3.1 GHz)
Packaging Label	Dell.com Order
Color Choice	Silver, Touch
Packaging	Shipping Material, Standard
FGA Module	HAD171503_1904/US/BTS
Optical Software	Cyberlink Media Suite Essentials without Media
Additional Settings	Dropbox, Digital Delivery, 20GB for 1 Year Promotion
Additional Settings	Adobe Revel 1.1 Premium Digital Delivery
Additional Settings	FastAccess Facial Recognition 4, Digital Delivery (FastAccess Anywhere)
CFI Included (Smart Selection)	CFI Not Included
Hard Drive Software	IRST (Intel Rapid Start Technology) Driver
WiDi	WIDI Driver
Palmrest Labels	Palmrest Label, English
LCD	17.3 inch LED Backlit Touch Display with Truelife and FHD resolution (1920 x 1080)
Office Productivity Software	No Office License Included
Non-Microsoft Application Software	Additional Software
Security Software	McAfee LiveSafe 12 Month Subscription
Power Supply	90 Watt AC Adaptor
Operating System Recovery Options	Operating System Recovery Media Not Included
Transportation from ODM to region	BTS/BTP shipment

**ACCESSORIES**

Dell Wireless Touch Mouse WM713	Qty	3
---------------------------------	-----	---

Dell Part# 332-1683	Unit Price	\$59.99
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Manufacturer Part# N18W9

Dell Part# 332-1683

Limited time offer: Save \$59.58

Limited Time Offer!

- \$178.74

**TOTAL: \$3,899.97**

Free Shipping & Easy Returns!

Limited Time Offer!

Free Shipping & Easy Returns!

Limited Time Offer!

	Total Price
Subtotal	\$3,899.97
Shipping & Handling	\$38.99
Shipping & Handling Discount	-\$38.99
Tax	\$236.94

**Total Price<sup>1</sup> \$4,136.91**

In the event that you are subject to a tax holiday, you will not be charged tax.

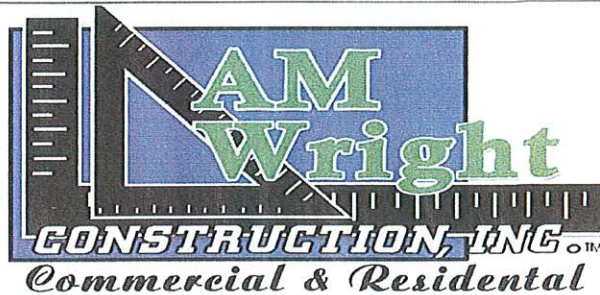
As low as \$125/mo<sup>2</sup>



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snCM12



## Proposal

AM Wright Construction, Inc.  
Florida Certified Building Contractor CBC 1255247  
601 Holmes Avenue  
Daytona Beach, Florida 32114-1802  
386-679-3487 Cell

September 7, 2014

To: Mrs. Renee Forbes Williams  
595 West Church Street Unit J  
Orlando, Florida 32805

Project: Build out commercial space  
595 W. Church Street Unit J

AM Wright Construction Inc. provided **Labor and Materials** to build-out existing space.

- Frame rear wall to separate work shop from classroom
- Frame front wall to separate reception area
- Drop electrical supply from ceiling to power equipment.
- Install drywall on exterior walls and finish
- Install acoustical panels in existing rails
- Install tile in designated areas of building.
- Install carpet in customers areas approximately 560 sf

**Total Contract Price**

**\$7,000.00**

Respectfully Submitted

  
Arthur M. Wright

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment terms will be provided upon acceptance of bid.

Date \_\_\_\_\_

Customer Signature \_\_\_\_\_



BARR DISPLAY  
3033 MERCY DR  
ORLANDO, FL 32808

SALES QUOTE

Sales Quote Number: SQ22113

Sales Quote Date: 08/22/14

Page: 1

Sell  
To: DESIGN HOUSE OF COLOUR  
RENEE WILLIAMS  
595 W CHURCH UNIT J  
ORLANDO, FL 32825

Ship  
To: DESIGN HOUSE OF COLOUR  
RENEE WILLIAMS  
595 W CHURCH UNIT J  
ORLANDO, FL 32825

Ship Via

Customer ID 1162029

Terms COD

SalesPerson ALAYNE LEWIS

Item No.	Description	Unit	Quantity	Unit Price	Total Price
**OPTION 2**					
7941	PIPELINE OUTRIGGER	EA	84	45.00	3,780.00
8154B	12" BLACK SHELF BRACKET	EA	188	1.25	235.00
5910M	12"X24" MAPLE MELAMINE SHELF	EA	50	6.45	322.50
5915M	12"X48" MAPLE MELAMINE SHELF	EA	44	10.75	473.00
7943	PIPELINE 3" HANGRAIL BRACKT	EA	194	3.25	630.50
8810B	BLK 2' REC HANGRAIL X 1/2"	EA	100	4.75	475.00
8229B	12" BLK.RECT.TUBE FACEOUT	EA	20	4.25	85.00
7944	PIPELINE 12" FACEOUT	EA	100	3.25	325.00
14009M	SET OF 2 LG MAPLE NEST TABLES	SET	1	179.00	179.00
7930	PIPELINE NESTING TABLE- LG	EA	1	180.00	180.00
9301KD	4' COUNTER W/METAL LEGS- MAPLE	EA	1	245.00	245.00
9303KD	CORNER CASE W/METAL LEGS-MAPLE	EA	1	145.00	145.00
Transferred to page 2.....					7,075.00

BARR DISPLAY  
3033 MERCY DR  
ORLANDO, FL 32808

SALES QUOTE

Sales Quote Number: SQ22113

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Page: 2

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ORLANDO, FL 32825

Ship Via

Customer ID 1162029

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SalesPerson ALAYNE LEWIS

Item No.	Description	Unit	Quantity	Unit Price	Total Price
	Transferred from page 1.....				7,075.00
9302KD	REG. STAND W/METAL LEGS- MAPLE	EA	1	160.00	160.00

ABOVE PRICES DO NOT INCLUDE  
FREIGHT.

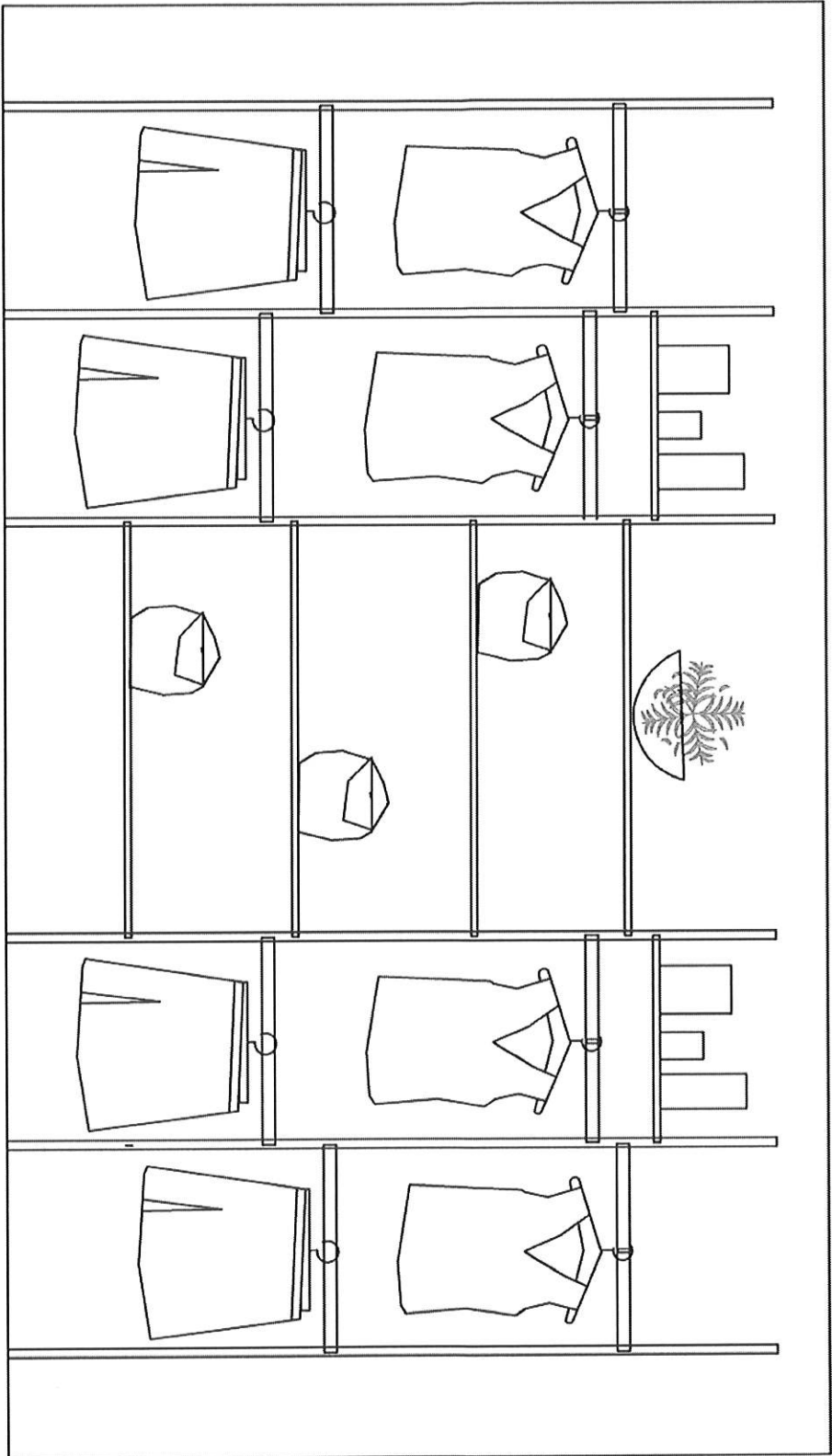
Amount Subject to  
Sales Tax  
7,235.00

Amount Exempt  
from Sales Tax  
0.00

Subtotal: 7,235.00  
Invoice Discount: 0.00  
Total Sales Tax: 459.10

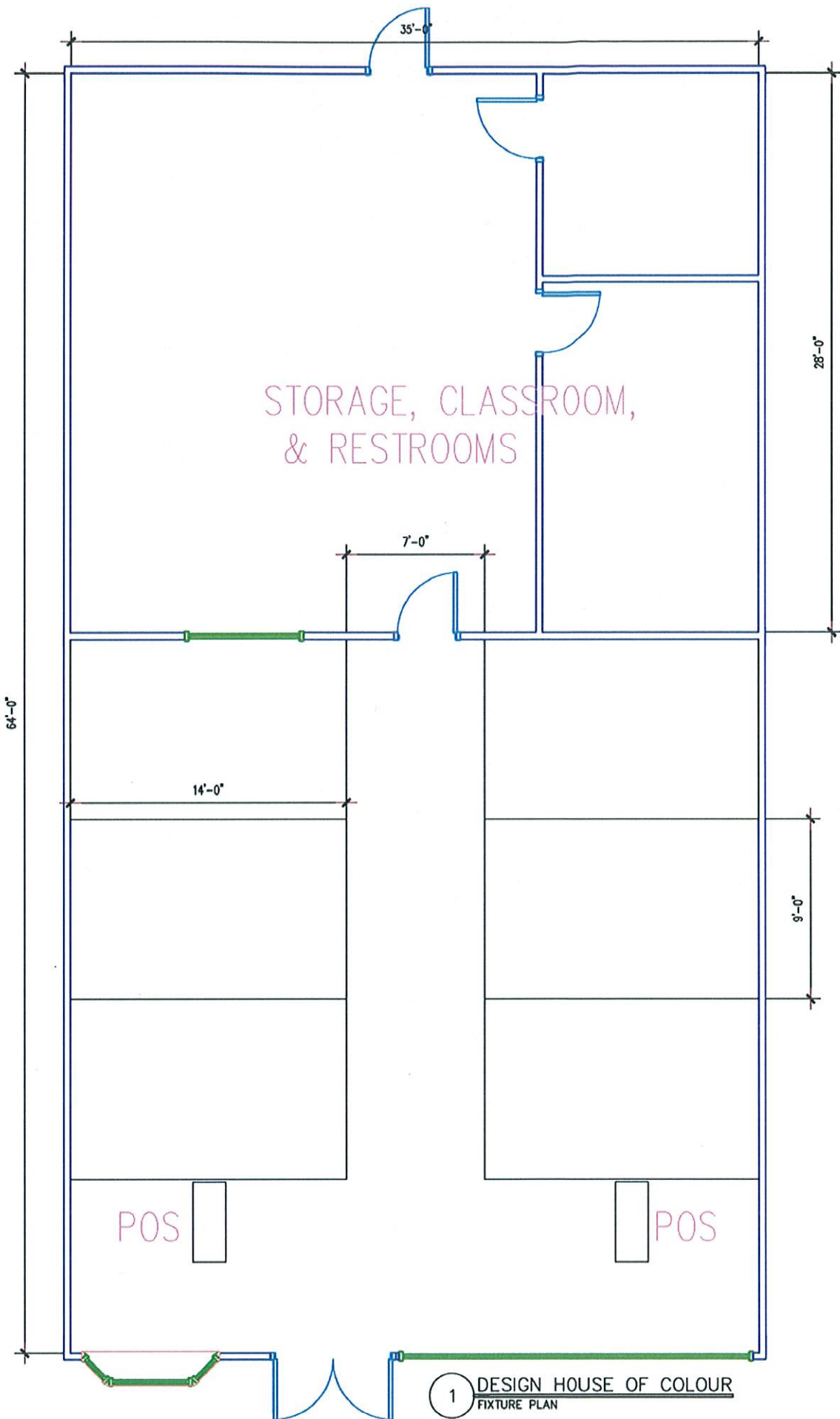
Total: 7,694.10

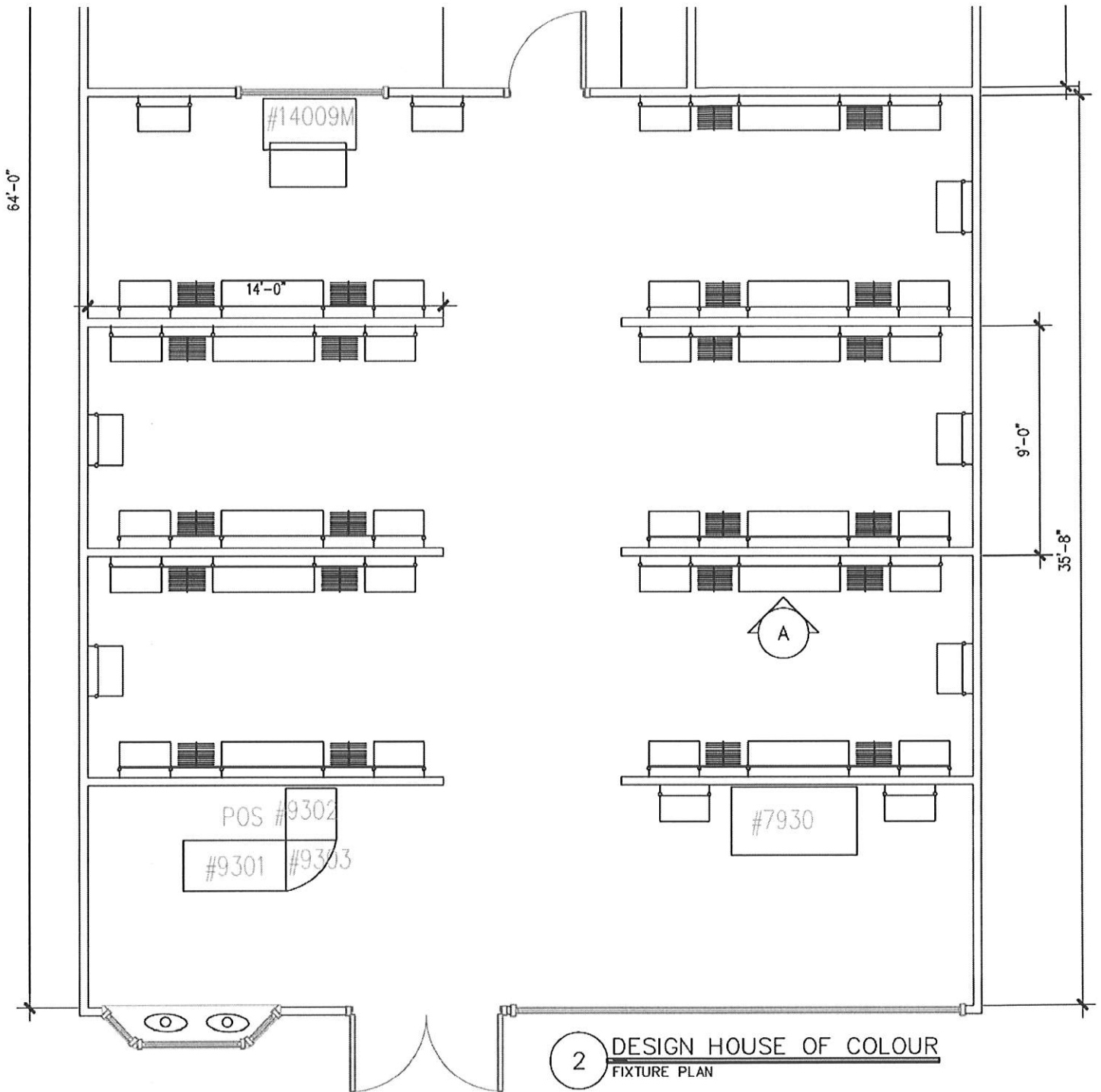
8'-0"



A

DESIGN HOUSE OF COLOUR  
WALL ELEVATION







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> Supplies > Discount Office Furniture > Desks & Workstations > Desks

## Mayline e5 4-Person Workstation w/Beltway

Tweet 8+1

Item #MLNEZPW5001 – 123-1/2w x 60d x 29-1/2h, Summer Suede/Cocoa

**\$2,213.57** /Each

**MAYLINE**

When item is available.

Freight Delivery

Print



### Product Details

- Mayline e5 4-Person Workstation w/Beltway
- Includes four 60 x 30 desks and a 60" technology beltway that provides easy access to 16 power outlets eight per side from a seated position.
- Electrical system plugs into any outlet and routes through the e5 furniture system.
- Full-width trough below outlets keeps cords organized and off the desk surface.
- See Fi

Be the first to write a review

### Product Details   Reviews

Includes four 60 x 30 desks and a 60" technology beltway that provides easy access to 16 power outlets eight per side from a seated position. Electrical system plugs into any outlet and routes through the e5 furniture system. Full-width trough below outlets keeps cords organized and off the desk surface with matching casegoods. Silver painted steel legs. Color: Summer Suede/Cocoa. Overall Width: 123 1/2" Overall Depth: 60".

See more e5 4-Person Workstation w/Beltway

### Additional Information:

Color	Cocoa
Top Material	Laminated Compressed Wood
Top Thickness	1 1/8"
Width Maximum	123 1/2"
Depth Maximum	60"

### Also Consider



**Luminary Series Wood  
Veneer Table Desk**  
72w x 36d x 29h, Cherry

**\$538.53**



9/9/2014

Mayline e5 4-Person Workstation w/Beltway - MLNEZPW5001

Height Maximum	29 1/2"
Caster/glide/wheel	Leveling Glides
Base Material	Tubular Steel
Edge Detail Profile	Square
Series Name	Mayline e5 Open Desking Series
Compliance Standards	Green Leaf VOC
Pre-consumer Recycled Content Percent	0%
Post-consumer Recycled Content Percent	0%
Total Recycled Content Percent	0%



**Mira Series Wood Veneer  
Bow Front Desk**  
72w x 42d x 29h, Espresso

**\$655.96**



**Mira Series Wood Veneer  
Bow Front Desk**  
72w x 42d x 29h, Medium  
Cherry

**\$655.98**



**Mira Series Wood Veneer  
Straight Front Desk**  
72w x 36d x 29h, Espresso

**\$649.67**



**Mira Series Wood Veneer  
Straight Front Desk**  
72w x 36d x 29h, Medium  
Cherry

**\$649.64**



9/9/2014

Mayline e5 4-Person Workstation w/Beltway - MLNEZPW5001

Ordering more than  
\$500.00 of the same  
products? We can help  
with pricing!

OfficeFurniture2go.com > Shopping cart

3 \$941

Need help? Email or Call

Print page

Free Shipping | 20+ Years Experience | Free Lifetime Warranty

Talk to one of our experts 1.800.460.0858

Please Review Your Shopping Cart

Questions? Call 1.800.460.0858 Reference #262-021-551  
Businesses, Government, Schools and Military Fax  
Purchase Orders to 1-866-869-6338

Item	Unit	Price	Quantity	Your Savings	Item Total
------	------	-------	----------	--------------	------------

101-LBA102	Mesh Back Chair				
------------	-----------------	--	--	--	--

Black

by Office Source \$97 Please re-enter Quantity  
using numbers only. \$328 \$388 Update

Delete

101-MHH185	2' x 3' Aluminum Frame Acrylate				
------------	---------------------------------	--	--	--	--

Whiteboard

White Surface / Aluminum

by Ghent \$58 Please re-enter Quantity using  
numbers only. \$29 \$58 Update

Delete

101-IXA015	6' Racetrack Conference Table				
------------	-------------------------------	--	--	--	--

Cherry

by Marquis \$495 Please re-enter Quantity using  
numbers only. \$244 \$495 Update

Delete

Note: On all orders to Alaska and Hawaii, we will  
simply add \$3 per pound

and you will enjoy complete White Glove Service on  
ANY order

(a minimum of \$395 will apply on orders under 150  
lbs.) Shipping & Handling:

Lifetime Warranty:

Sub Total: FREE

FREE

\$941

SHOP WITH CONFIDENCE

Free Lifetime Warranty

Your Privacy Guaranteed

Your Satisfaction Guaranteed

Prefer to order by phone?

1.800.460.0858

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Trusted Store

Over 20,000 transactions as a Google Trusted Store

Shopped and evaluated by Customer Service 99.5% escalation-free orders

24-48 hours to reply to emails

Shipping 92% on-time shipping

5-7 days to deliver (average)

Returns 15-day return policy for most items

Less than 14 days to process returns

Google Certified & Protected

\$1,000 of free protection offered

Google's help resolving issues

Learn more

[Privacy Policy](#) » [Verify](#) » [About Google Trusted Stores](#) »

[All Products](#)[Domains](#)[Websites](#)[Hosting & SSL](#)

NEW

[Get Found](#)[Email & Tools](#)[Support](#)

1 Cart 2 Billing & Payment 3 Thank You

## Review your current order

Deluxe Custom Web Store Design	12 Months	\$199.99 /mo	\$2,399.88 <a href="#">Remove</a>
Standard Search Engine Visibility <b>33% Off</b>	12 Months	\$1.99 /mo Save \$12.00	\$23.88 <a href="#">Remove</a>
Get Found Starter <b>10% Off</b>	12 Months	\$4.49 /mo Save \$6.00	\$53.88 <a href="#">Remove</a>
Basic SiteLock	1 Year	\$17.88 /yr	\$17.88 <a href="#">Remove</a>
Email Essentials <b>20% Off</b>	12 Months	\$3.99 /mo Save \$12.00	\$47.88 <a href="#">Remove</a>
Online Bookkeeping Annual <b>16% Off</b>	12 Months	\$8.34 /mo Save \$19.89	\$99.99 <a href="#">Remove</a>

Total cost

USD \$

[United States](#)**\$1,997.51**

Total savings

**\$695.77**[Add a domain to your order](#)[.com](#)

Round up for charity (optional)

\$0.49

[Have a Promo Code?](#)

Total cost

**\$1,997.51**

Total savings

**\$695.77**[Proceed to Checkout](#)

Click here for offer disclaimers

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----- Original Message -----

Subject: Your EDDM Quote from www.everydoordirectmail.com

From: sales@taradel.com

Date: Thu, September 11, 2014 5:28 pm

To: renee.williams@designhouseofcolour.com

Dear Renee ,

You indicated that you were interested in mailing 7000 pieces using the 6.25" x 9" EDDM™ Postcard. Please find your requested pricing (highlighted), along with other affordable options, listed in this email. Our pricing includes EVERYTHING: Design, printing, mail preparation, postage AND shipping directly to your local post office. Ready to get started?

[Continue Order Using Saved Map](#)

Or, call us at 1-800-481-1656

Thank you.

## Buy More, Save More

QUANTITY	PRICE/PIECE	TOTAL
1,000	52¢	\$520.00
2,500	36¢	\$900.00
5,000	32¢	\$1,600.00
<b>7,000</b>	<b>32¢</b>	<b>\$2,240.00</b>
10,000	31¢	\$3,100.00
25,000	30¢	\$7,500.00
50,000	29¢	\$14,500.00

### All-Inclusive Pricing:

- Includes Design Template
- Includes Full-Color Printing
- Includes All Mailing Services
- Includes Priority Mail shipment directly to your local USPS
- Includes USPS Postage

For the year Jan. 1–Dec. 31, 2013, or other tax year beginning , 2013, ending , 20

See separate instructions.

Your first name and initial Last name  
 RODNEY I WILLIAMS  
 Your social security number

If a joint return, spouse's first name and initial Last name  
 RENEE F WILLIAMS  
 Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.  
 1727 COTSWOLD DRIVE

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).  
 ORLANDO FL 32825

Foreign country name Foreign province/state/county Foreign postal code

Make sure the SSN(s) above and on line 6c are correct.

**Presidential Election Campaign**  
 Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.  
☐ You ☐ Spouse

**Filing Status**

1 ☐ Single  
 2 ☒ Married filing jointly (even if only one had income)  
 3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶  
 4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶  
 5 ☐ Qualifying widow(er) with dependent child

Check only one box.

**Exemptions**

6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a . . . . .  
 b ☒ Spouse . . . . .

**Boxes checked on 6a and 6b** 2

**No. of children on 6c who:**  
 • lived with you 1  
 • did not live with you due to divorce or separation (see instructions) \_\_\_\_\_

**Dependents on 6c not entered above** \_\_\_\_\_

**Add numbers on lines above** 3

c Dependents:		(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)
(1) First name	Last name			
JOURNEE	WAGNER		Daughter	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

If more than four dependents, see instructions and check here ☐

d Total number of exemptions claimed . . . . .

**Income**

7 Wages, salaries, tips, etc. Attach Form(s) W-2 . . . . . 7 280,092.  
 8a Taxable interest. Attach Schedule B if required . . . . . 8a 55.  
 b Tax-exempt interest. Do not include on line 8a . . . . . 8b  
 9a Ordinary dividends. Attach Schedule B if required . . . . . 9a  
 b Qualified dividends . . . . . 9b  
 10 Taxable refunds, credits, or offsets of state and local income taxes . . . . . 10  
 11 Alimony received . . . . . 11  
 12 Business income or (loss). Attach Schedule C or C-EZ . . . . . 12  
 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐ 13  
 14 Other gains or (losses). Attach Form 4797 . . . . . 14  
 15a IRA distributions . . . . . 15a b Taxable amount . . . . . 15b  
 16a Pensions and annuities . . . . . 16a b Taxable amount . . . . . 16b  
 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 -4,109.  
 18 Farm income or (loss). Attach Schedule F . . . . . 18  
 19 Unemployment compensation . . . . . 19  
 20a Social security benefits . . . . . 20a b Taxable amount . . . . . 20b  
 21 Other income. List type and amount . . . . . 21  
 22 Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶ 22 276,038.

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

**Adjusted Gross Income**

23 Educator expenses . . . . . 23  
 24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ . . . . . 24  
 25 Health savings account deduction. Attach Form 8889 . . . . . 25  
 26 Moving expenses. Attach Form 3903 . . . . . 26  
 27 Deductible part of self-employment tax. Attach Schedule SE . . . . . 27  
 28 Self-employed SEP, SIMPLE, and qualified plans . . . . . 28  
 29 Self-employed health insurance deduction . . . . . 29  
 30 Penalty on early withdrawal of savings . . . . . 30  
 31a Alimony paid b Recipient's SSN ▶ . . . . . 31a  
 32 IRA deduction . . . . . 32  
 33 Student loan interest deduction . . . . . 33  
 34 Tuition and fees. Attach Form 8917 . . . . . 34  
 35 Domestic production activities deduction. Attach Form 8903 . . . . . 35  
 36 Add lines 23 through 35 . . . . . 36  
 37 Subtract line 36 from line 22. This is your **adjusted gross income** ▶ 37 276,038.

**Tax and Credits****Standard Deduction for—**

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:  
Single or Married filing separately, \$6,100  
Married filing jointly or Qualifying widow(er), \$12,200  
Head of household, \$8,950

**Other Taxes****Payments**

If you have a qualifying child, attach Schedule EIC.

**Refund**

Direct deposit? See instructions.

**Amount You Owe****Third Party Designee****Sign Here**

Joint return? See instructions. Keep a copy for your records.

**Paid Preparer Use Only**

<b>38</b>	Amount from line 37 (adjusted gross income)	<b>38</b>	276,038.
<b>39a</b>	Check <input type="checkbox"/> <b>You</b> were born before January 2, 1949, <input type="checkbox"/> <b>Blind.</b> <input type="checkbox"/> <b>Spouse</b> was born before January 2, 1949, <input type="checkbox"/> <b>Blind.</b> Total boxes checked <b>39a</b>		
<b>b</b>	If your spouse itemizes on a separate return or you were a dual-status alien, check here <b>39b</b>		
<b>40</b>	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	<b>40</b>	75,192.
<b>41</b>	Subtract line 40 from line 38	<b>41</b>	200,846.
<b>42</b>	Exemptions. If line 38 is \$150,000 or less, multiply \$3,900 by the number on line 6d. Otherwise, see instructions	<b>42</b>	11,700.
<b>43</b>	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	<b>43</b>	189,146.
<b>44</b>	Tax (see instructions). Check if any from: <b>a</b> <input type="checkbox"/> Form(s) 8814 <b>b</b> <input type="checkbox"/> Form 4972 <b>c</b> <input type="checkbox"/>	<b>44</b>	34,752.
<b>45</b>	Alternative minimum tax (see instructions). Attach Form 6251	<b>45</b>	
<b>46</b>	Add lines 44 and 45	<b>46</b>	34,752.
<b>47</b>	Foreign tax credit. Attach Form 1116 if required	<b>47</b>	
<b>48</b>	Credit for child and dependent care expenses. Attach Form 2441	<b>48</b>	
<b>49</b>	Education credits from Form 8863, line 19	<b>49</b>	
<b>50</b>	Retirement savings contributions credit. Attach Form 8880	<b>50</b>	
<b>51</b>	Child tax credit. Attach Schedule 8812, if required	<b>51</b>	
<b>52</b>	Residential energy credits. Attach Form 5695	<b>52</b>	
<b>53</b>	Other credits from Form: <b>a</b> <input type="checkbox"/> 3800 <b>b</b> <input type="checkbox"/> 8801 <b>c</b> <input type="checkbox"/>	<b>53</b>	
<b>54</b>	Add lines 47 through 53. These are your total credits	<b>54</b>	
<b>55</b>	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	<b>55</b>	34,752.
<b>56</b>	Self-employment tax. Attach Schedule SE	<b>56</b>	
<b>57</b>	Unreported social security and Medicare tax from Form: <b>a</b> <input type="checkbox"/> 4137 <b>b</b> <input type="checkbox"/> 8919	<b>57</b>	
<b>58</b>	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	<b>58</b>	
<b>59a</b>	Household employment taxes from Schedule H	<b>59a</b>	
<b>b</b>	First-time homebuyer credit repayment. Attach Form 5405 if required	<b>59b</b>	
<b>60</b>	Taxes from: <b>a</b> <input type="checkbox"/> Form 8959 <b>b</b> <input type="checkbox"/> Form 8960 <b>c</b> <input type="checkbox"/> Instructions; enter code(s)	<b>60</b>	
<b>61</b>	Add lines 55 through 60. This is your total tax	<b>61</b>	34,752.
<b>62</b>	Federal income tax withheld from Forms W-2 and 1099	<b>62</b>	45,804.
<b>63</b>	2013 estimated tax payments and amount applied from 2012 return	<b>63</b>	
<b>64a</b>	Earned income credit (EIC)	<b>64a</b>	
<b>b</b>	Nontaxable combat pay election <b>64b</b>		
<b>65</b>	Additional child tax credit. Attach Schedule 8812	<b>65</b>	
<b>66</b>	American opportunity credit from Form 8863, line 8	<b>66</b>	
<b>67</b>	Reserved	<b>67</b>	
<b>68</b>	Amount paid with request for extension to file	<b>68</b>	
<b>69</b>	Excess social security and tier 1 RRTA tax withheld	<b>69</b>	
<b>70</b>	Credit for federal tax on fuels. Attach Form 4136	<b>70</b>	
<b>71</b>	Credits from Form: <b>a</b> <input type="checkbox"/> 2439 <b>b</b> <input type="checkbox"/> Reserved <b>c</b> <input type="checkbox"/> 8885 <b>d</b> <input type="checkbox"/>	<b>71</b>	
<b>72</b>	Add lines 62, 63, 64a, and 65 through 71. These are your total payments	<b>72</b>	45,804.
<b>73</b>	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	<b>73</b>	11,052.
<b>74a</b>	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	<b>74a</b>	11,052.
<b>b</b>	Routing number <b>c</b> Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
<b>d</b>	Account number		
<b>75</b>	Amount of line 73 you want applied to your 2014 estimated tax	<b>75</b>	
<b>76</b>	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	<b>76</b>	
<b>77</b>	Estimated tax penalty (see instructions)	<b>77</b>	

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below. ☐ No

Designee's name  Phone no.  Personal identification number (PIN)

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature Spouse's signature. If a joint return, both must sign.	Date Date	Your occupation DIVISION MANAGER Spouse's occupation UNIVERSITY FACULTY	Daytime phone number (386) 852-1000 If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
--	--------------	--	---

Print/Type preparer's name	Preparer's signature	Date	PTIN
Firm's name	Not for use by paid preparers	Firm's EIN	Check <input type="checkbox"/> if self-employed
Firm's address	Self-Prepared	Phone no.	

**SCHEDULE A  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Itemized Deductions**

► Information about Schedule A and its separate instructions is at [www.irs.gov/schedulea](http://www.irs.gov/schedulea).

► Attach to Form 1040.

OMB No. 1545-0074

**2013**

Attachment  
Sequence No. **07**

Name(s) shown on Form 1040

Your social security number

RODNEY I & RENEE F WILLIAMS

<b>Caution.</b> Do not include expenses reimbursed or paid by others.			
<b>Medical and Dental Expenses</b>	<b>1</b> Medical and dental expenses (see instructions) . . . . .	<b>1</b>	
	<b>2</b> Enter amount from Form 1040, line 38 <b>2</b>		
	<b>3</b> Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1949, multiply line 2 by 7.5% (.075) instead	<b>3</b>	
	<b>4</b> Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		<b>4</b>
<b>Taxes You Paid</b>	<b>5</b> State and local (check only one box):	<b>5</b>	2,176.
	a <input type="checkbox"/> Income taxes, or		
	b <input checked="" type="checkbox"/> General sales taxes		
	<b>6</b> Real estate taxes (see instructions) . . . . .	<b>6</b>	
	<b>7</b> Personal property taxes . . . . .	<b>7</b>	
	<b>8</b> Other taxes. List type and amount ►	<b>8</b>	
	<b>9</b> Add lines 5 through 8 . . . . .		<b>9</b> 2,176.
	<b>Interest You Paid</b>	<b>10</b> Home mortgage interest and points reported to you on Form 1098	<b>10</b>
<b>Note.</b> Your mortgage interest deduction may be limited (see instructions).	<b>11</b> Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ►	<b>11</b>	
	<b>12</b> Points not reported to you on Form 1098. See instructions for special rules . . . . .	<b>12</b>	
	<b>13</b> Mortgage insurance premiums (see instructions) . . . . .	<b>13</b>	
	<b>14</b> Investment interest. Attach Form 4952 if required. (See instructions.)	<b>14</b>	
	<b>15</b> Add lines 10 through 14 . . . . .		<b>15</b> 2,471.
	<b>Gifts to Charity</b>	<b>16</b> Gifts by cash or check. If you made any gift of \$250 or more, see instructions. . . . .	<b>16</b>
If you made a gift and got a benefit for it, see instructions.	<b>17</b> Other than by cash or check. If any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500 . . . . .	<b>17</b>	45,000.
	<b>18</b> Carryover from prior year . . . . .	<b>18</b>	
	<b>19</b> Add lines 16 through 18 . . . . .		<b>19</b> 70,545.
<b>Casualty and Theft Losses</b>	<b>20</b> Casualty or theft loss(es). Attach Form 4684. (See instructions.) . . . . .	<b>20</b>	
<b>Job Expenses and Certain Miscellaneous Deductions</b>	<b>21</b> Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ►	<b>21</b>	
	<b>22</b> Tax preparation fees . . . . .	<b>22</b>	
	<b>23</b> Other expenses—investment, safe deposit box, etc. List type and amount ►	<b>23</b>	
	<b>24</b> Add lines 21 through 23 . . . . .	<b>24</b>	
	<b>25</b> Enter amount from Form 1040, line 38 <b>25</b>		
	<b>26</b> Multiply line 25 by 2% (.02) . . . . .	<b>26</b>	
	<b>27</b> Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-		<b>27</b>
<b>Other Miscellaneous Deductions</b>	<b>28</b> Other—from list in instructions. List type and amount ►	<b>28</b>	
<b>Total Itemized Deductions</b>	<b>29</b> Is Form 1040, line 38, over \$150,000?		
	<input type="checkbox"/> <b>No.</b> Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.		
	<input checked="" type="checkbox"/> <b>Yes.</b> Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.		
	<b>30</b> If you elect to itemize deductions even though they are less than your standard deduction, check here . . . . .		<b>29</b> 75,192.



**SCHEDULE E**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at [www.irs.gov/schedulee](http://www.irs.gov/schedulee).

OMB No. 1545-0074

**2013**

Attachment  
Sequence No. **13**

Name(s) shown on return

RODNEY I & RENEE F WILLIAMS

Your social security number

**Part I** **Income or Loss From Rental Real Estate and Royalties** **Note.** If you are in the business of renting personal property, use Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

**A** Did you make any payments in 2013 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☐ No

**B** If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

<b>1a</b>	Physical address of each property (street, city, state, ZIP code)				
<b>A</b>	124 MARSH WREN COURT DAYTONA BEACH FL 32119				
<b>B</b>					
<b>C</b>					
<b>1b</b>	Type of Property (from list below)	<b>2</b> For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	<b>Fair Rental Days</b>	<b>Personal Use Days</b>	<b>QJV</b>
<b>A</b>		<b>A</b>	360	0	<input type="checkbox"/>
<b>B</b>		<b>B</b>			<input type="checkbox"/>
<b>C</b>		<b>C</b>			<input type="checkbox"/>

**Type of Property:**

- |                           |                              |             |                    |
|---------------------------|------------------------------|-------------|--------------------|
| 1 Single Family Residence | 3 Vacation/Short-Term Rental | 5 Land      | 7 Self-Rental      |
| 2 Multi-Family Residence  | 4 Commercial                 | 6 Royalties | 8 Other (describe) |

Income:		Properties:	A	B	C
<b>3</b>	Rents received . . . . .	<b>3</b>	18,000.		
<b>4</b>	Royalties received . . . . .	<b>4</b>			
<b>Expenses:</b>					
<b>5</b>	Advertising . . . . .	<b>5</b>	150.		
<b>6</b>	Auto and travel (see instructions) . . . . .	<b>6</b>	200.		
<b>7</b>	Cleaning and maintenance . . . . .	<b>7</b>	1,500.		
<b>8</b>	Commissions. . . . .	<b>8</b>			
<b>9</b>	Insurance . . . . .	<b>9</b>	600.		
<b>10</b>	Legal and other professional fees . . . . .	<b>10</b>			
<b>11</b>	Management fees . . . . .	<b>11</b>	750.		
<b>12</b>	Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>	6,768.		
<b>13</b>	Other interest. . . . .	<b>13</b>			
<b>14</b>	Repairs. . . . .	<b>14</b>	725.		
<b>15</b>	Supplies . . . . .	<b>15</b>	224.		
<b>16</b>	Taxes . . . . .	<b>16</b>	3,623.		
<b>17</b>	Utilities. . . . .	<b>17</b>			
<b>18</b>	Depreciation expense or depletion . . . . .	<b>18</b>	7,500.		
<b>19</b>	Other (list) ▶ . . . . .	<b>19</b>	0.		
<b>20</b>	Total expenses. Add lines 5 through 19 . . . . .	<b>20</b>			
<b>21</b>	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 . . . . .	<b>21</b>			
<b>22</b>	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . .	<b>22</b>	( 4,109. )	( )	( )
<b>23a</b>	Total of all amounts reported on line 3 for all rental properties . . . . .	<b>23a</b>	18,000.		
<b>b</b>	Total of all amounts reported on line 4 for all royalty properties . . . . .	<b>23b</b>			
<b>c</b>	Total of all amounts reported on line 12 for all properties . . . . .	<b>23c</b>	6,768.		
<b>d</b>	Total of all amounts reported on line 18 for all properties . . . . .	<b>23d</b>	7,500.		
<b>e</b>	Total of all amounts reported on line 20 for all properties . . . . .	<b>23e</b>			
<b>24</b>	<b>Income.</b> Add positive amounts shown on line 21. Do not include any losses . . . . .	<b>24</b>			
<b>25</b>	<b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . . . . .	<b>25</b>	( 4,109. )		
<b>26</b>	<b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2. . . . .	<b>26</b>	-4,109.		

## Noncash Charitable Contributions

▶ Attach to your tax return if you claimed a total deduction of over \$500 for all contributed property.

▶ Information about Form 8283 and its separate instructions is at [www.irs.gov/form8283](http://www.irs.gov/form8283).

OMB No. 1545-0908

Attachment  
Sequence No. **155**

Name(s) shown on your income tax return

Identifying number

RODNEY I & RENEE F WILLIAMS

**Note.** Figure the amount of your contribution deduction before completing this form. See your tax return instructions.

**Section A. Donated Property of \$5,000 or Less and Publicly Traded Securities**—List in this section **only** items (or groups of similar items) for which you claimed a deduction of \$5,000 or less. Also, list publicly traded securities even if the deduction is more than \$5,000 (see instructions).

**Part I Information on Donated Property**—If you need more space, attach a statement.

1	(a) Name and address of the donee organization	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached)	(c) Description of donated property (For a vehicle, enter the year, make, model, and mileage. For securities, enter the company name and the number of shares.)
A	GOODWILL 7390 CURRY FORD RD ORLANDO FL 32822	<input type="checkbox"/>	FURNITURE, DESIGNER SHOES AND HANDBAGS, CLOTHING AND LINENS
B	ORLANDO WORLD OUTREACH P.O. BOX 1829 ORLANDO FL 32802	<input type="checkbox"/>	CLOTHING LINE (NEW)
C		<input type="checkbox"/>	
D		<input type="checkbox"/>	
E		<input type="checkbox"/>	

**Note.** If the amount you claimed as a deduction for an item is \$500 or less, you do not have to complete columns (e), (f), and (g).

	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)	(f) How acquired by donor	(g) Donor's cost or adjusted basis	(h) Fair market value (see instructions)	(i) Method used to determine the fair market value
A	11/06/2013	01/2012	PURCHASE	25,000.	20,000.	INTERNET
B	03/15/2013	01/2011	PURCHASE	50,000.	25,000.	INTERNET
C						
D						
E						

**Part II Partial Interests and Restricted Use Property**—Complete lines 2a through 2e if you gave less than an entire interest in a property listed in Part I. Complete lines 3a through 3c if conditions were placed on a contribution listed in Part I; also attach the required statement (see instructions).

**2a** Enter the letter from Part I that identifies the property for which you gave less than an entire interest ▶  
If Part II applies to more than one property, attach a separate statement.

**b** Total amount claimed as a deduction for the property listed in Part I: **(1)** For this tax year ▶  
**(2)** For any prior tax years ▶

**c** Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization above):  
Name of charitable organization (donee)

Address (number, street, and room or suite no.)

City or town, state, and ZIP code

**d** For tangible property, enter the place where the property is located or kept ▶

**e** Name of any person, other than the donee organization, having actual possession of the property ▶

**3a** Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property? . . . . . 

Yes	No

**b** Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire? . . . . . 

--	--

**c** Is there a restriction limiting the donated property for a particular use? . . . . . 

--	--



For the year Jan. 1–Dec. 31, 2012, or other tax year beginning

, 2012, ending

, 20

See separate instructions.

Your first name and initial

Last name

odney I

Williams

if a joint return, spouse's first name and initial

Last name

Renee F

Williams

Your social security number

Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.

Apt. no.

1727 Cotswold Drive

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).

Orlando, FL 32825

Foreign country name

Foreign province/state/county

Foreign postal code

Presidential Election Campaign

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

☐ You ☐ Spouse

## Filing Status

1 ☐ Single2 ☒ Married filing jointly (even if only one had income)3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶5 ☐ Qualifying widow(er) with dependent child

## Exemptions

6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a . . . . .b ☒ Spouse . . . . .

## c Dependents:

(1) First name

Last name

(2) Dependent's social security number

(3) Dependent's relationship to you

(4) ☒ if child under age 17 qualifying for child tax credit (see instructions)

Journeye Wagner

Daughter

Boxes checked on 6a and 6b

2

No. of children on 6c who:

• lived with you

• did not live with you due to divorce or separation (see instructions)

Dependents on 6c not entered above

Add numbers on lines above ▶

1

3

d Total number of exemptions claimed . . . . .

## Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 . . . . .

8a Taxable interest. Attach Schedule B if required . . . . .

b Tax-exempt interest. Do not include on line 8a . . . . .

8b

9a Ordinary dividends. Attach Schedule B if required . . . . .

b Qualified dividends . . . . .

9b

10 Taxable refunds, credits, or offsets of state and local income taxes . . . . .

11 Alimony received . . . . .

12 Business income or (loss). Attach Schedule C or C-EZ . . . . .

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐

14 Other gains or (losses). Attach Form 4797 . . . . .

15a IRA distributions . . . . .

15a

b Taxable amount . . . . .

16a Pensions and annuities . . . . .

16a

b Taxable amount . . . . .

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

18 Farm income or (loss). Attach Schedule F . . . . .

19 Unemployment compensation . . . . .

20a Social security benefits . . . . .

20a

b Taxable amount . . . . .

21 Other income. List type and amount . . . . .

22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶

23 Educator expenses . . . . .

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ . . . . .

25 Health savings account deduction. Attach Form 8889 . . . . .

26 Moving expenses. Attach Form 3903 . . . . .

27 Deductible part of self-employment tax. Attach Schedule SE . . . . .

28 Self-employed SEP, SIMPLE, and qualified plans . . . . .

29 Self-employed health insurance deduction . . . . .

30 Penalty on early withdrawal of savings . . . . .

31a Alimony paid b Recipient's SSN ▶

32 IRA deduction . . . . .

33 Student loan interest deduction . . . . .

34 Tuition and fees. Attach Form 8917 . . . . .

35 Domestic production activities deduction. Attach Form 8903 . . . . .

36 Add lines 23 through 35 . . . . .

37 Subtract line 36 from line 22. This is your adjusted gross income ▶

## Adjusted Gross Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

**Tax and Credits****Standard deduction or—**

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:  
Single or Married filing separately, \$5,950  
Married filing jointly or Qualifying widow(er), \$11,900  
Head of household, \$8,700

<b>38</b>	Amount from line 37 (adjusted gross income)	<b>38</b>	270217
<b>39a</b>	Check <input type="checkbox"/> You were born before January 2, 1948, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1948, <input type="checkbox"/> Blind. Total boxes checked <b>▶ 39a</b>		
<b>b</b>	If your spouse itemizes on a separate return or you were a dual-status alien, check here <b>▶ 39b</b>		
<b>40</b>	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	<b>40</b>	39225
<b>41</b>	Subtract line 40 from line 38	<b>41</b>	230992
<b>42</b>	Exemptions. Multiply \$3,800 by the number on line 6d.	<b>42</b>	11400
<b>43</b>	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	<b>43</b>	219592
<b>44</b>	Tax (see instructions). Check if any from: <b>a</b> <input type="checkbox"/> Form(s) 8814 <b>b</b> <input type="checkbox"/> Form 4972 <b>c</b> <input type="checkbox"/> 962 election	<b>44</b>	49372
<b>45</b>	Alternative minimum tax (see instructions). Attach Form 6251	<b>45</b>	
<b>46</b>	Add lines 44 and 45	<b>46</b>	
<b>47</b>	Foreign tax credit. Attach Form 1116 if required	<b>47</b>	
<b>48</b>	Credit for child and dependent care expenses. Attach Form 2441	<b>48</b>	
<b>49</b>	Education credits from Form 8863, line 19	<b>49</b>	
<b>50</b>	Retirement savings contributions credit. Attach Form 8880	<b>50</b>	
<b>51</b>	Child tax credit. Attach Schedule 8812, if required	<b>51</b>	
<b>52</b>	Residential energy credits. Attach Form 5695	<b>52</b>	
<b>53</b>	Other credits from Form: <b>a</b> <input type="checkbox"/> 3800 <b>b</b> <input type="checkbox"/> 8801 <b>c</b> <input type="checkbox"/>	<b>53</b>	
<b>54</b>	Add lines 47 through 53. These are your total credits	<b>54</b>	
<b>55</b>	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	<b>55</b>	49372

**Other Taxes**

<b>56</b>	Self-employment tax. Attach Schedule SE	<b>56</b>	
<b>57</b>	Unreported social security and Medicare tax from Form: <b>a</b> <input type="checkbox"/> 4137 <b>b</b> <input type="checkbox"/> 8919	<b>57</b>	
<b>58</b>	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	<b>58</b>	
<b>59a</b>	Household employment taxes from Schedule H	<b>59a</b>	
<b>b</b>	First-time homebuyer credit repayment. Attach Form 5405 if required	<b>59b</b>	
<b>60</b>	Other taxes. Enter code(s) from instructions	<b>60</b>	
<b>61</b>	Add lines 55 through 60. This is your total tax	<b>61</b>	49372

**Payments**

If you have a qualifying child, attach Schedule EIC.

<b>62</b>	Federal income tax withheld from Forms W-2 and 1099	<b>62</b>	43746
<b>63</b>	2012 estimated tax payments and amount applied from 2011 return	<b>63</b>	
<b>64a</b>	Earned income credit (EIC)	<b>64a</b>	
<b>b</b>	Nontaxable combat pay election <b>64b</b>		
<b>65</b>	Additional child tax credit. Attach Schedule 8812	<b>65</b>	
<b>66</b>	American opportunity credit from Form 8863, line 8	<b>66</b>	
<b>67</b>	Reserved	<b>67</b>	
<b>68</b>	Amount paid with request for extension to file	<b>68</b>	
<b>69</b>	Excess social security and tier 1 RRTA tax withheld	<b>69</b>	2948
<b>70</b>	Credit for federal tax on fuels. Attach Form 4136	<b>70</b>	
<b>71</b>	Credits from Form: <b>a</b> <input type="checkbox"/> 2439 <b>b</b> <input type="checkbox"/> Reserved <b>c</b> <input type="checkbox"/> 8801 <b>d</b> <input type="checkbox"/> 8885	<b>71</b>	
<b>72</b>	Add lines 62, 63, 64a, and 65 through 71. These are your total payments	<b>72</b>	46694

**Refund**

Direct deposit? See instructions.

<b>73</b>	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	<b>73</b>	
<b>74a</b>	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <b>▶</b> <input type="checkbox"/>	<b>74a</b>	
<b>b</b>	Routing number	<b>c</b>	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
<b>d</b>	Account number		
<b>75</b>	Amount of line 73 you want applied to your 2013 estimated tax <b>▶</b>	<b>75</b>	

**Amount You Owe**

<b>76</b>	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	<b>76</b>	2678
<b>77</b>	Estimated tax penalty (see instructions)	<b>77</b>	

**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below. ☐ No

Designee's name <b>▶</b>	Phone no. <b>▶</b>	Personal identification number (PIN) <b>▶</b>
--------------------------	--------------------	---

**Sign Here**

Joint return? See instructions. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		University Faculty	

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name <b>▶</b>	Firm's EIN <b>▶</b>	Phone no.		
Firm's address <b>▶</b>				

**SCHEDULE A**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (991)

**Itemized Deductions**

► Information about Schedule A and its separate instructions is at [www.irs.gov/form1040](http://www.irs.gov/form1040).

► Attach to Form 1040.

OMB No. 1545-0074

**2012**

Attachment  
Sequence No. **07**

Name(s) shown on Form 1040

Your social security number

Rodney I Williams & Renee Forbes Williams

**Medical  
and  
Dental  
Expenses**

**Caution.** Do not include expenses reimbursed or paid by others.

- 1 Medical and dental expenses (see instructions) . . . . . 1
- 2 Enter amount from Form 1040, line 38 **2** . . . . .
- 3 Multiply line 2 by 7.5% (.075) . . . . . 3
- 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- . . . . . 4

**Taxes You  
Paid**

5 State and local (check only one box):

- a ☐ Income taxes, or
- b ☐ General sales taxes

- 6 Real estate taxes (see instructions) . . . . . 6
- 7 Personal property taxes . . . . . 7
- 8 Other taxes. List type and amount ► . . . . . 8

9 Add lines 5 through 8 . . . . . 9

**Interest  
You Paid**

- 10 Home mortgage interest and points reported to you on Form 1098 . . . . . 10
- 11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ► . . . . . 11

**Note.**  
Your mortgage interest deduction may be limited (see instructions).

- 12 Points not reported to you on Form 1098. See instructions for special rules . . . . . 12
- 13 Mortgage insurance premiums (see instructions) . . . . . 13
- 14 Investment interest. Attach Form 4952 if required. (See instructions.) . . . . . 14
- 15 Add lines 10 through 14 . . . . . 15

**Gifts to  
Charity**

If you made a gift and got a benefit for it, see instructions.

- 16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions. . . . . 16 27,000.
- 17 Other than by cash or check. If any gift of \$250 or more, see instructions. You **must** attach Form 8283 if over \$500 . . . . . 17 12,225.
- 18 Carryover from prior year . . . . . 18
- 19 Add lines 16 through 18 . . . . . 19 39,225.

**Casualty and  
Theft Losses**

- 20 Casualty or theft loss(es). Attach Form 4664. (See instructions.) . . . . . 20

**Job Expenses  
and Certain  
Miscellaneous  
Deductions**

- 21 Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ► . . . . . 21
- 22 Tax preparation fees . . . . . 22
- 23 Other expenses—investment, safe deposit box, etc. List type and amount ► . . . . . 23
- 24 Add lines 21 through 23 . . . . . 24
- 25 Enter amount from Form 1040, line 38 **25** . . . . . 25
- 26 Multiply line 25 by 2% (.02) . . . . . 26
- 27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- . . . . . 27

**Other  
Miscellaneous  
Deductions**

- 28 Other—from list in instructions. List type and amount ► . . . . . 28

**Total  
Itemized  
Deductions**

- 29 Add the amounts in the far right column for lines 4 through 26. Also, enter this amount on Form 1040, line 40 . . . . . 29 39,225.
- 30 If you elect to itemize deductions even though they are less than your standard deduction, check here . . . . . ☐



**SCHEDULE E**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

Name(s) shown on return

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at [www.irs.gov/form1040](http://www.irs.gov/form1040).

OMB No. 1545-0074

**2012**

Attachment  
Sequence No. **13**

Your social security number

Rodney I Williams

**Part I** **Income or Loss From Rental Real Estate and Royalties** **Note.** If you are in the business of renting personal property, use Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

**A** Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☐ No

**B** If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

<b>1a</b>	Physical address of each property (street, city, state, ZIP code)				
<b>A</b>	124 Marsh Wren Court Daytona Beach, FL 32119				
<b>B</b>					
<b>C</b>					
<b>1b</b>	Type of Property (from list below)	<b>2</b> For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
<b>A</b>	1		365	0	
<b>B</b>					
<b>C</b>					

**Type of Property:**

- |                           |                              |             |                    |
|---------------------------|------------------------------|-------------|--------------------|
| 1 Single Family Residence | 3 Vacation/Short-Term Rental | 5 Land      | 7 Self-Rental      |
| 2 Multi-Family Residence  | 4 Commercial                 | 6 Royalties | 8 Other (describe) |

Income:		Properties:	A	B	C
<b>3</b>	Rents received . . . . .	<b>3</b>	18000		
<b>4</b>	Royalties received . . . . .	<b>4</b>			
<b>Expenses:</b>					
<b>5</b>	Advertising . . . . .	<b>5</b>			
<b>6</b>	Auto and travel (see instructions) . . . . .	<b>6</b>			
<b>7</b>	Cleaning and maintenance . . . . .	<b>7</b>	250		
<b>8</b>	Commissions . . . . .	<b>8</b>			
<b>9</b>	Insurance . . . . .	<b>9</b>	660		
<b>10</b>	Legal and other professional fees . . . . .	<b>10</b>			
<b>11</b>	Management fees . . . . .	<b>11</b>	1080		
<b>12</b>	Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>			
<b>13</b>	Other interest . . . . .	<b>13</b>			
<b>14</b>	Repairs . . . . .	<b>14</b>	7155		
<b>15</b>	Supplies . . . . .	<b>15</b>	2100		
<b>16</b>	Taxes . . . . .	<b>16</b>			
<b>17</b>	Utilities . . . . .	<b>17</b>			
<b>18</b>	Depreciation expense or depletion . . . . .	<b>18</b>	7500		
<b>19</b>	Other (list) ▶ . . . . .	<b>19</b>			
<b>20</b>	Total expenses. Add lines 5 through 19 . . . . .	<b>20</b>	18745		
<b>21</b>	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b> . . . . .	<b>21</b>	745		
<b>22</b>	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions) . . . . .	<b>22</b>	( )	( )	( )
<b>23a</b>	Total of all amounts reported on line 3 for all rental properties . . . . .	<b>23a</b>	7500		
<b>b</b>	Total of all amounts reported on line 4 for all royalty properties . . . . .	<b>23b</b>			
<b>c</b>	Total of all amounts reported on line 12 for all properties . . . . .	<b>23c</b>			
<b>d</b>	Total of all amounts reported on line 18 for all properties . . . . .	<b>23d</b>	7500		
<b>e</b>	Total of all amounts reported on line 20 for all properties . . . . .	<b>23e</b>	18745		
<b>24</b>	<b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses . . . . .	<b>24</b>		745	
<b>25</b>	<b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . . . . .	<b>25</b>	( )		
<b>26</b>	<b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2. . . . .	<b>26</b>		745	



Regions Bank  
Daytona  
100 Corsair Drive  
Daytona Beach, FL 32114

RENEE FORBES WILLIAMS  
1727 COTSWOLD DR  
ORLANDO FL 32825-8406

ACCOUNT #

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### LIFEGREEN SAVINGS

June 1, 2014 through June 30, 2014

#### SUMMARY

Beginning Balance	\$26,320.07	Annual Percentage Yield Earned This Period	0.01%
Deposits & Credits	\$50.00 +	Interest This Period	\$0.21
Net Interest Earned	\$0.21 +	Avg Collected Balance This Period	\$25,478.40
Withdrawals	\$2,000.00 -	2014 YTD Interest	\$120.28
Fees	\$0.00 -		
Automatic Transfers	\$0.00 +		
Ending Balance	\$24,370.28		

#### DEPOSITS & CREDITS

06/16	EB From Checking #	Ref# 000000 5268699	50.00
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#### INTEREST

06/30	Interest Payment	0.21
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#### WITHDRAWALS

06/10	EB to Checking #	Ref# 000000 8121399	1,000.00
06/26	EB to Checking #	Ref# 000000 9825796	1,000.00
Total Withdrawals			\$2,000.00

#### Total For This Statement Period

#### Total Calendar Year-to-Date

Total Overdraft Fees (may include waived fees)	0.00	0.00
Total Returned Item Fees (may include waived fees)	0.00	0.00

#### DAILY BALANCE SUMMARY

Date	Balance	Date	Balance	Date	Balance
06/10	25,320.07	06/26	24,370.07		
06/16	25,370.07	06/30	24,370.28		

**Regions Bank**  
Daytona  
100 Corsair Drive  
Daytona Beach, FL 32114

RENEE FORBES WILLIAMS  
1727 COTSWOLD DR  
ORLANDO FL 32825-8406

ACCOUNT #



092

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**You may request account disclosures containing  
terms, fees, and rate information (if applicable)  
for your account by contacting any Regions office.**

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**For all your banking needs, please call 1-800-REGIONS (734-4667).  
or visit us on the Internet at [www.regions.com](http://www.regions.com). (TTY/TDD 1-800-374-5791)**

**For new purchase or refinance mortgage information, contact your  
Mortgage Production Manager, Steven Atkinson, NMLS 546253, at (386)804-0939 or online at  
[www.regionsmortgage.com/stevenatkinson](http://www.regionsmortgage.com/stevenatkinson).**

**For payment and other information about your existing mortgage loan, contact Mortgage  
Servicing at 1-800-986-2462 and for Home Equity loans call 1- 800-231-7493.**



**Thank You For Banking With Regions!**

2012 Regions Bank Member FDIC. All loans subject to credit approval.



## PROPOSED SAMPLE PRODUCTS



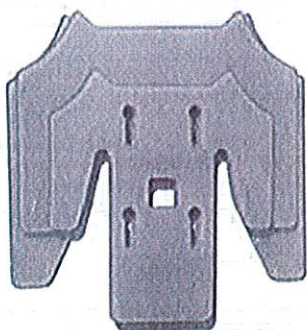




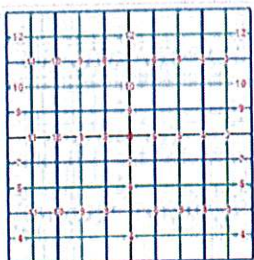
# Shoe Platen Kit

[www.shoeplaten.com](http://www.shoeplaten.com)

## Included Items:



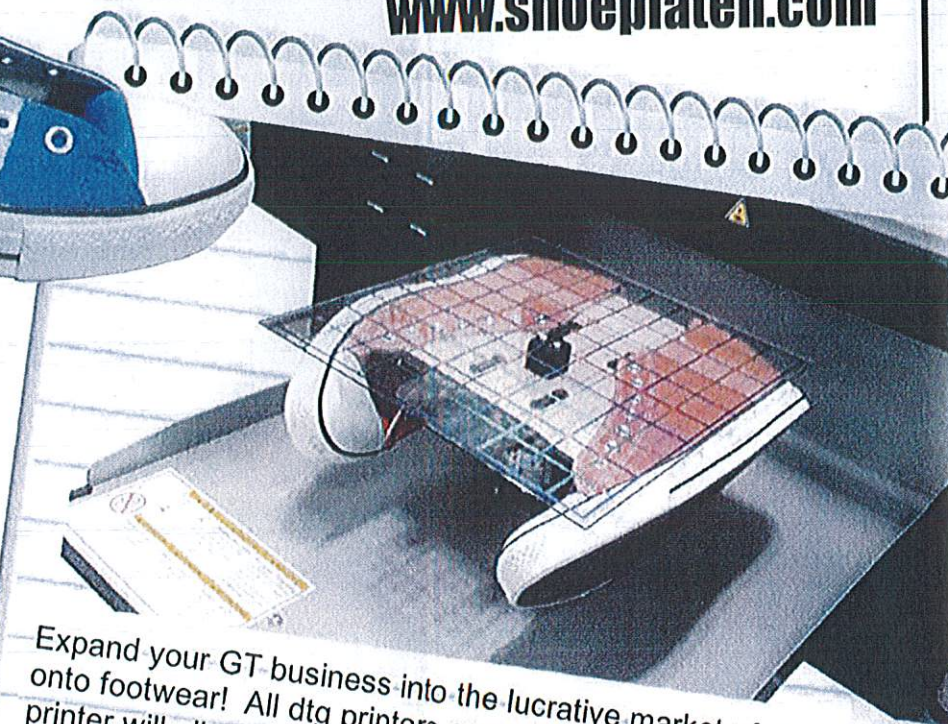
Three Shoe Platen Inserts



Alignment Jig for Artwork Placement



Optional Mounting Kit  
(Same as Touchdown Platen,  
Optional Purchase as well)



Expand your GT business into the lucrative market of printing onto footwear! All dtg printers can print on to shirts, but your GT printer will allow you to print on semi-flat surfaces easier because of the increase gap from the bottom of the print head to the top of the substrate. This allows for the printing on to a variety of footwear where there is less competition and higher profits.

For those GT users that already have a Touchdown Platen, use the same Mounting Kit to attach the Shoe Platen Inserts and save money by purchasing the Basic Kit. This will increase your profits and provide you a quicker return on your investment.

**Scan for info  
on Shoe Platen!**



Purchase at:



For additional information and videos on the Shoe Platen Kits, visit [www.shoeplaten.com](http://www.shoeplaten.com)

### PRICING INFO:

Shoe Platen Basic Kit (Mounting Kit not Include)	MSRP: \$275.00 Part #:SPBK
Shoe Platen Complete Kit (Mounting Kit Provided)	MSRP: \$425.00 Part #:SPCK

Phone: 407-482-2802  
Web: [www.GarmentTools.com](http://www.GarmentTools.com)

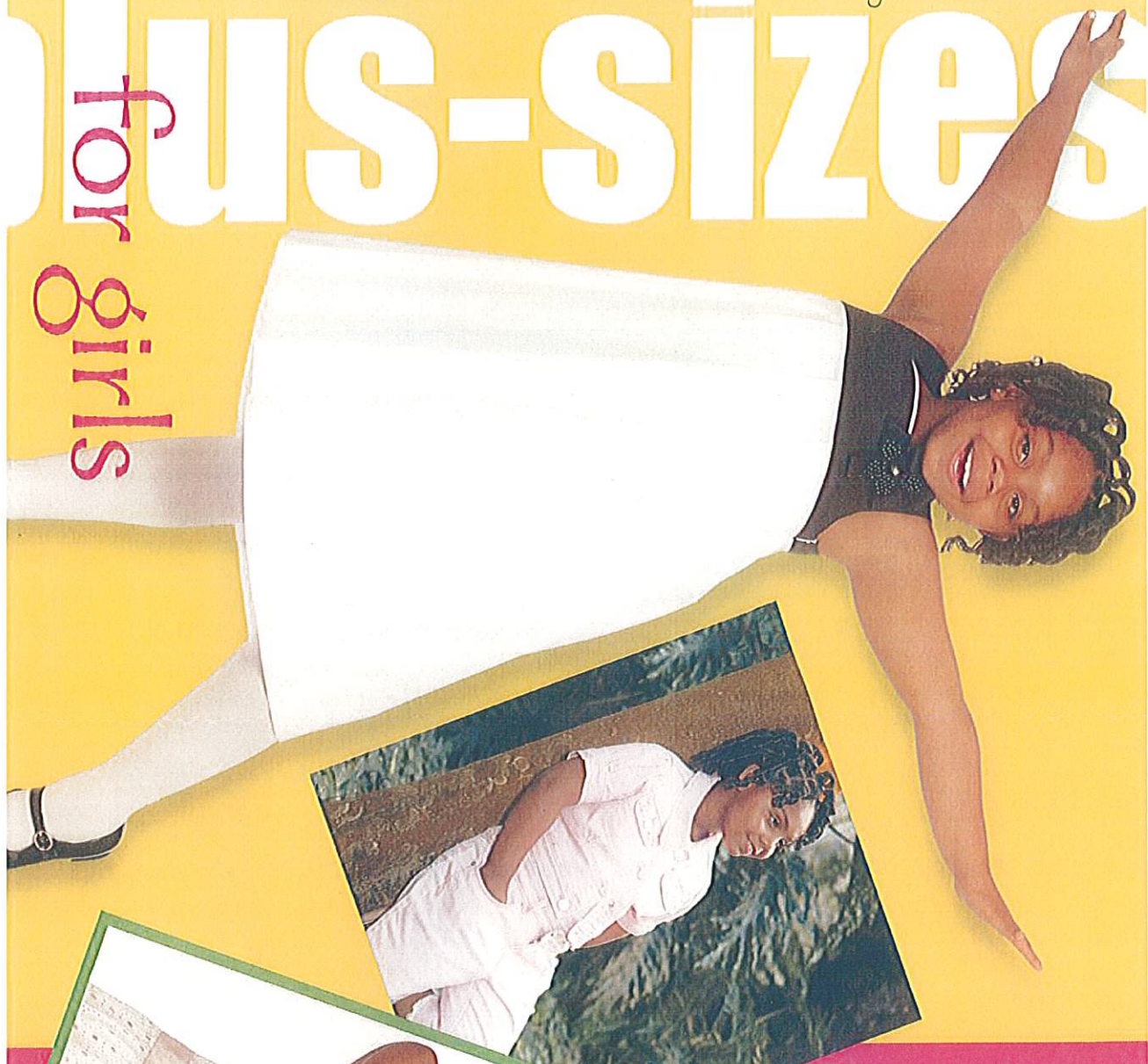


**ProSpangle**  
**Spangle Machine**



Mail advertising for previous business' campaign

# Plus-sizes for girls



## JELLYBEAN

OF MIAMI

Signature plus-size apparel for girls





plus-size clothing line for young girls, offering stylish, attractive apparel, ranging from casual sportswear to formal dresses.

Girls' plus-size clothing choices are no longer limited. Now there's an age appropriate clothing line tailored for their plump but youthful shapes.

The need for plus-size clothing is continuously increasing. The market has shown double-digit sales growth (18%) for the past three years.

For more product information, contact Renee L. Forbes at (305) 447-7772 or [Info@jellybeanofmiamiinc.com](mailto:Info@jellybeanofmiamiinc.com)

1.800.870.6603

[jellybeanofmiamiinc.com](http://jellybeanofmiamiinc.com)



**JELLYBEAN**  
OF MIAMI

Signature plus-size apparel for girls



17419 NW 56th Court  
Miami, FL 33015