Vendor: AT&T MO01-AT&T Mobility
PO Box 6463 CAROL STREAM IL 60197-6463

Pymt # 0010029786
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
287015173591X07	07/18/2026		554.06	10-2620-538-000-00-000-028-000-0000	MONTHLY PHONE BILL-JULY 26
		Payment Amount:	**554.06**		

Vendor: AT&T MO01-AT&T Mobility
PO Box 6463 CAROL STREAM IL 60197-6463

Pymt # 0010029786
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
287015173591X07	07/18/2026		554.06	10-2620-538-000-00-000-028-000-0000	MONTHLY PHONE BILL-JULY 26
		Payment Amount:	**554.06**		

0010029786

08/05/2026

********************554.06**

PAY Five Hundred Fifty-Four and 06/100 Dollars

To the Order of:

AT&T Mobility
PO Box 6463
CAROL STREAM IL 60197-6463

NON-NEGOTIABLE

[redacted]

AT&T

LEHIGHTON AREA SCHOOL DISTRICT
1000 UNION ST
LEHIGHTON, PA 18235-1700

Issue Date: Jul 18, 2026
Account Number: 287015173591
Foundation Account: 03008143
Invoice: 287015173591X07262026

AutoPay: Set up automatic payments that you can update whenever you want. Go to wireless.att.com/premiercare to sign up through eBill now.

Want to learn more about your details and usage? Sign into Premier eBill at wireless.att.com/premiercare and go to your customizable reporting.

Total due
$554.06
Please pay by:
Aug 13, 2026

Account summary

Your last bill	$553.48
Payment, Jul 07 - Thank you!	-$553.48
Remaining balance	$0.00

PAID
AUG 05 2026

Service summary

Wireless	*Page 2*	$554.06
Total services		$554.06

Total due **$554.06**
Please pay by Aug 13, 2026

7/28/26

Ways to pay and manage your account:

business.att.com **Call 611** from AT&T device | **800.331.** TTY: 866. from any

[redacted]

[redacted]

Invoice: 287015173591X07262026

Service activity

Wireless

Number	User	Page	Monthly charges: Plan	Add-ons	Company fees & surcharges	Government fees & taxes	Total
[redacted]		2	$187.00	-$46.75	$3.19	-	$143.44
		4	$15.00	-$1.25	$4.36	$1.95	$20.06
		4	$15.00	-$1.25	$4.36	$1.95	$20.06
		5	$15.00	-$1.25	$4.36	$1.95	$20.06
		5	$10.00	-$1.25	$3.74	-	$12.49
		5	$10.00	-$1.25	$3.74	-	$12.49
		6	$15.00	-$1.25	$4.36	$1.95	$20.06
Subtotal for Group 3			$267.00	-$54.25	$28.11	$7.80	$248.66
[redacted]		3	$187.00	-$46.75	$3.19	-	$143.44
		6	$15.00	-$1.25	$4.36	$1.95	$20.06
		7	$15.00	-$1.25	$4.36	$1.95	$20.06
			$217.00	-$49.25	$11.91	$3.90	$183.56
[redacted]		7	$45.00	-$12.50	$6.82	$1.95	$41.27
		7	$34.99	$33.75	$9.88	$1.95	$80.57
Total			**$563.99**	**-$82.25**	**$56.72**	**$15.60**	**$554.06**

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AUG 05 2026

Pooling detail

Data Pool: Mobile Select - Pooled

Allocation factor: 0.0000 | Total under: 3,145,728 | Total overage: 0

Number	User	Allowance (KB)	Used (KB)	Allocation Back (KB)	Adjustment Amount
[redacted]		3,145,728	0	0	$0.00
Total for Mobile Select - Pooled		**3,145,728**	**0**	**0**	**$0.00**

Group 3

6 Devices

Monthly charges *Jun 19 - Jul 18*

1. Mobile Share Advantage for Business 25GB $199.00

Group 3 continues...

AT&T

[redacted]

...Group 3 continued

2. Discount for Mobile Share	-$12.00
3. National Account Discount	-$46.75

Company fees & surcharges

4. Federal Universal Service Fee	$2.18
5. State Gross Receipts Surcharge	$1.01

Total for Group 3 **$143.44**

Shared usage summary (Jun 19 - Jul 18)

Number *User*	*Data (GB)*	*Text*	*Talk*
[redacted]	1.25	215	8
	0.00	0	0
	0.09	14	16
	0.01	0	0
	0.00	0	0
	0.14	282	284
Total usage	1.47	511	308
Included in plan	25.00	unlimited	unlimited
*Rollover available through Jul 18: 16.76GB	0.00		
Rollover available starting Jul 19	**23.54**		

Usage is rounded up based on your plan. For more details on your Shared usage summary, visit business.att.com.
** Unused Rollover Data expires after 1 billing period or when you change your plan or account.*

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Group 4
2 Devices

Monthly charges *Jun 19 - Jul 18*

1. Mobile Share Advantage for Business 25GB	$199.00
2. Discount for Mobile Share	-$12.00
3. National Account Discount	-$46.75

Company fees & surcharges

4. Federal Universal Service Fee	$2.18
5. State Gross Receipts Surcharge	$1.01

Total for Group 4 **$143.44**

Shared usage summary (Jun 19 - Jul 18)

Number *User*	*Data (GB)*	*Text*	*Talk*
[redacted]	0.00	0	0
	0.21	5	2
Total usage	0.21	5	2
Included in plan	25.00	unlimited	unlimited
*Rollover available through Jul 18: 24.72GB	0.00		
Rollover available starting Jul 19	**24.80**		

Group 4 continues...

...Group 4 continued

Usage is rounded up based on your plan. For more details on your Shared usage summary, visit business.att.com.
** Unused Rollover Data expires after 1 billing period or when you change your plan or account.*

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AUG 05 2026

[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Access for iPhone 4G LTE w/ VVM	$40.00
2.	Discount for Access	-$25.00
3.	CRU Detail Bill ZC	$0.00
4.	Plan messages	$0.00
5.	National Account Credit	-$1.25

Company fees & surcharges

6.	Administrative Fee	$2.49
7.	Federal Universal Service Fee	$0.43
8.	Regulatory Cost Recovery Fee	$1.25
9.	State Gross Receipts Surcharge	$0.19

Government fees & taxes

10.	911 Service Fee	$1.95

[redacted] **$20.06**

Usage summary

Talk	*Used*
Plan minutes (unlimited)	8
Call over Wi-Fi	4
Text	*Used*
Plan messages (unlimited)	215
Data	*Used*
Mobile Share Advantage for Business 25GB (25.00 GB)	1.25

[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Access for iPhone 4G LTE w/ VVM	$40.00
2.	Discount for Access	-$25.00
3.	CRU Detail Bill ZC	$0.00
4.	Plan messages	$0.00
5.	National Account Credit	-$1.25

Company fees & surcharges

6.	Administrative Fee	$2.49
7.	Federal Universal Service Fee	$0.43
8.	Regulatory Cost Recovery Fee	$1.25
9.	State Gross Receipts Surcharge	$0.19

Government fees & taxes

10.	911 Service Fee	$1.95

[redacted] **$20.06**

Wireless continues...

Wireless continued

[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Access for iPhone 4G LTE w/ VVM	$40.00
2.	Discount for Access	-$25.00
3.	CRU Detail Bill ZC	$0.00
4.	Plan messages	$0.00
5.	National Account Credit	-$1.25

Company fees & surcharges

6.	Administrative Fee	$2.49
7.	Federal Universal Service Fee	$0.43
8.	Regulatory Cost Recovery Fee	$1.25
9.	State Gross Receipts Surcharge	$0.19

Government fees & taxes

10.	911 Service Fee	$1.95

[redacted] **$20.06**

Usage summary

Talk	*Used*
Plan minutes (unlimited)	16
Call over Wi-Fi	29

Text	*Used*
Plan messages (unlimited)	14

Data	*Used*
Mobile Share Advantage for Business 25GB (25.00 GB)	0.09

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AUG 05 2026

[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Access for iPad on 4G LTE	$10.00
2.	CRU Detail Bill ZC	$0.00
3.	National Account Credit	-$1.25

Company fees & surcharges

4.	Administrative Fee	$2.49
5.	Regulatory Cost Recovery Fee	$1.25

[redacted] **$12.49**

Usage summary

Data	*Used*
Mobile Share Advantage for Business 25GB (25.00 GB)	0.01

[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Access for iPad on 4G LTE	$10.00
2.	CRU Detail Bill ZC	$0.00
3.	National Account Credit	-$1.25

Company fees & surcharges

4.	Administrative Fee	$2.49
5.	Regulatory Cost Recovery Fee	$1.25

[redacted] **$12.49**

Wireless continues...

[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Access for iPhone 4G LTE w/ VVM	$40.00
2.	Discount for Access	-$25.00
3.	CRU Detail Bill ZC	$0.00
4.	Plan messages	$0.00
5.	National Account Credit	-$1.25

Company fees & surcharges

6.	Administrative Fee	$2.49
7.	Federal Universal Service Fee	$0.43
8.	Regulatory Cost Recovery Fee	$1.25
9.	State Gross Receipts Surcharge	$0.19

Government fees & taxes

10.	911 Service Fee	$1.95

$20.06

Usage summary

Talk	*Used*
Plan minutes (unlimited)	284
Text	*Used*
Plan messages (unlimited)	282
Data	*Used*
Mobile Share Advantage for Business 25GB (25.00 GB)	0.14

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[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Access for iPhone 4G LTE w/ VVM	$40.00
2.	Discount for Access	-$25.00
3.	Plan messages	$0.00
4.	National Account Credit	-$1.25

Company fees & surcharges

5.	Administrative Fee	$2.49
6.	Federal Universal Service Fee	$0.43
7.	Regulatory Cost Recovery Fee	$1.25
8.	State Gross Receipts Surcharge	$0.19

Government fees & taxes

9.	911 Service Fee	$1.95

$20.06

Wireless continues...

[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Access for iPhone 4G LTE w/ VVM	$40.00
2.	Discount for Access	-$25.00
3.	CRU Detail Bill ZC	$0.00
4.	Plan messages	$0.00
5.	National Account Credit	-$1.25

Company fees & surcharges

6.	Administrative Fee	$2.49
7.	Federal Universal Service Fee	$0.43
8.	Regulatory Cost Recovery Fee	$1.25
9.	State Gross Receipts Surcharge	$0.19

Government fees & taxes

10.	911 Service Fee	$1.95

$20.06

Usage summary

Talk	*Used*
Plan minutes (unlimited)	2
Call over Wi-Fi	3

Text	*Used*
Plan messages (unlimited)	5

Data	*Used*
Mobile Share Advantage for Business 25GB (25.00 GB)	0.21

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AUG 05 2026

[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Mobile Select 3GB Pool iPhone on 4G LTE VVM	$70.00
2.	Discount for Mobile Select Savings	-$25.00
3.	CRU Detail Bill ZC	$0.00
4.	National Account Credit	-$1.25
5.	National Account Discount	-$11.25

Company fees & surcharges

6.	Administrative Fee	$2.49
7.	Federal Universal Service Fee	$2.03
8.	Regulatory Cost Recovery Fee	$1.25
9.	State Gross Receipts Surcharge	$1.05

Government fees & taxes

10.	911 Service Fee	$1.95

$41.27

[redacted]

Monthly charges *Jun 19 - Jul 18*

1.	Business Nation 450 with Rollover	$39.99
2.	Credit for Business Nation 450 with Rollover	-$5.00
3.	CRU Detail Bill ZC	$0.00
4.	DataPro 3GB for iPhone on 4G LTE with Visual Voicemail	$45.00

Usage summary

Talk	*Used*
Plan minutes (450)	0

570.657.6684 continues...

...570.657.6684 continued

5.	Text Messaging Unlimited - No Picture/Video	$20.00
6.	Credit for Text Messaging Unlimited - No Picture/ Video	-$10.00
7.	Pay Per Use Picture/Video Messaging	$0.00
8.	National Account Credit	-$1.25
9.	National Account Discount	-$20.00

Company fees & surcharges

10.	Administrative Fee	$2.49
11.	Federal Universal Service Fee	$3.86
12.	Regulatory Cost Recovery Fee	$1.25
13.	State Gross Receipts Surcharge	$2.28

Government fees & taxes

14.	911 Service Fee	$1.95

[redacted] **$80.57**

$554.06

Mobile to Mobile minutes (unlimited)	0
Night & Weekend minutes (5000)	0

Rollover minutes summary	*Used*
Previous Rollover available	4,950
Rollover added this bill period	+450
Expired Rollover *	-450
New Rollover balance	**4,950**

** Unused Rollover Minutes expire after 12 bill periods.*

PAID
AUG 05 2026

Detailed usage

[redacted]

Call Detail

Time	Place Called	Number Called	Rate Code	Feature Code	Min	Airtime Charges	LD/Addl Charges
Tuesday, Jun 23							
10:38am	INCOMI CL	570.657.6116	SDDV		1	$0.00	$0.00
11:56am	JIM TH PA	570.657.6116	SDDV		3	$0.00	$0.00
Wednesday, Jun 24							
08:50am	JIM TH PA	570.657.6050	SDDV		1	$0.00	$0.00
Tuesday, Jul 14							
07:35am	INCOMI CL	610.554.1072	SDDV		1	$0.00	$0.00
10:41am	INCOMI CL	610.577.5701	SDDV		1	$0.00	$0.00
Wednesday, Jul 15							
08:02am	INCOMI CL	570.657.6116	SDDV		1	$0.00	$0.00
04:29pm	INCOMI CL	610.554.1072	WIFI		1	$0.00	$0.00
Thursday, Jul 16							
03:51pm	INCOMI CL	315.883.3657	WIFI		3	$0.00	$0.00
Total for Call Detail					12	$0.00	$0.00

Rate code:
SDDV = Plan minutes
WIFI = Call over Wi-Fi

Data Detail

Time		To/From	Type/Unit	Rate Code	Charges
Text Messages					
Friday, Jul 03					
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:50pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:51pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
06:51pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
07:06pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
07:06pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
07:06pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00
07:06pm	Rcvd	650.414.3971	Text Message	UNLMSG	$0.00

484.629.3053 continues...

Vendor: BOROUGH O-Borough of Lehighton
1 Constitution Avenue PO Box 29 LEHIGHTON PA 18235-0000

Pymt # 0010029787
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
		Payment Amount:	61547.66		* Accrued A/P
		SEE PAYMENT DETAIL LISTING			

Vendor: BOROUGH O-Borough of Lehighton
1 Constitution Avenue PO Box 29 LEHIGHTON PA 18235-0000

Pymt # 0010029787
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
		Payment Amount:	61547.66		* Accrued A/P
		SEE PAYMENT DETAIL LISTING			

0010029787

08/05/2026

**********61,547.66

PAY Sixty-One Thousand Five Hundred Forty-Seven and 66/100 Dollars

To the Order of:

Borough of Lehighton
1 Constitution Avenue
PO Box 29
LEHIGHTON PA 18235-0000

NON-NEGOTIABLE

[redacted]

Payment Detail Listing

Borough of Lehighton (BOROUGH O)
1 Constitution Avenue
PO Box 29
LEHIGHTON PA 18235-0000

Payment Number: 0010029787
Payment Date: 08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
JUNE 26	07/13/2026		281.97	10-2620-622-000-20-120-000-026-0000	OLD STADIUM ELECTRIC
JUNE 26	07/13/2026		322.92	10-2620-424-000-30-120-000-026-0000	NEW STADIUM W&S
JUNE 26	07/13/2026		1632.51	10-2620-622-000-30-120-000-026-0000	NEW STADIUM ELECTRIC
JUNE 26	07/13/2026		15.00	10-2620-622-000-30-120-000-026-0000	BASEBALL FIELD
JUNE 26	07/13/2026		869.85	10-2620-424-000-30-800-000-026-0000	HS W&S
JUNE 26	07/13/2026		15.00	10-2620-622-000-00-000-000-026-0000	9TH ST SIGN
JUNE 26	07/13/2026		1244.72	10-2620-424-000-20-500-000-026-0000	MS W&S
JUNE 26	07/13/2026		127.01	10-2620-350-000-20-500-000-026-0000	MS FIRE PROTECTION
JUNE 26	07/13/2026		13538.48	10-2620-622-000-20-500-000-026-0000	MS ELECTRIC
JUNE 26	07/13/2026		13756.52	10-2620-622-000-30-800-000-026-0000	HS ELECTRIC
JUNE 26	07/13/2026		127.01	10-2620-350-000-10-200-000-026-0000	EC FIRE PROTECTION
JUNE 26	07/13/2026		1614.25	10-2620-424-000-10-200-000-026-0000	EC W&S
JUNE 26	07/13/2026		25617.90	10-2620-622-000-10-200-000-026-0000	EC ELECTRIC
JUNE 26	07/13/2026		152.95	10-2620-424-000-00-100-000-026-0000	ADMIN W&S
JUNE 26	07/13/2026		2213.56	10-2620-622-000-00-100-000-026-0000	ADMIN ELECTRIC
JUNE 26	07/13/2026		18.01	10-2620-622-000-00-000-000-026-0000	STREET LIGHTS
	Payment Amount:		**61547.66**		*** Accrued A/P**

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	STREET LIGHTS
BILLING DATE:	07/08/26
DUE DATE:	07/28/26

AMOUNT DUE

LAST PAYMENT:	DATE: 02/03/26	AMOUNT: 101.99
WATER PREVIOUS BALANCE:		0.00
SEWER PREVIOUS BALANCE:		0.00
ELECTRIC PREVIOUS BALANCE:		1.99-
GARBAGE PREVIOUS BALANCE:		0.00
CURRENT CHARGES:		20.00
IF PAID ON OR BEFORE 07/28/26:		18.01
IF PAID AFTER 07/28/26:		18.01

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING	CURRENT READING	USAGE
ELECTRIC		0	0	0

PAID ENTERED
AUG 05 2026

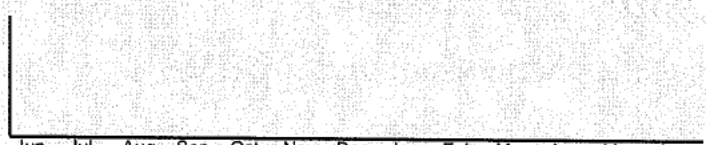
CURRENT CHARGES DETAIL

UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	POLE LIGHTS		20.00

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com

Electric Usage History



7-28-26

CGC (610) 391-0600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	STREET LIGHTS
BILLING DATE:	07/08/26

AMOUNT DUE

DUE DATE:	07/28/26
IF PAID ON OR BEFORE 07/28/26:	18.01
IF PAID AFTER 07/28/26:	18.01

AMOUNT ENCLOSED
18.01

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - STREET LIGHTS
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	1000 UNION ST
BILLING DATE:	07/13/26
DUE DATE:	08/03/26

AMOUNT DUE

LAST PAYMENT: DATE: 07/07/26	AMOUNT: 1,653.80
WATER PREVIOUS BALANCE:	0.00
SEWER PREVIOUS BALANCE:	0.00
ELECTRIC PREVIOUS BALANCE:	0.00
GARBAGE PREVIOUS BALANCE:	0.00
CURRENT CHARGES:	2,213.56
IF PAID ON OR BEFORE 08/03/26:	2,213.56
IF PAID AFTER 08/03/26:	2,213.56

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
ELECTRIC	01104489	06/05/26	49225	07/08/26	49365	11200

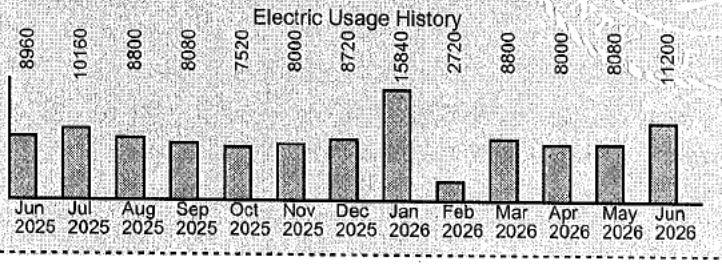
PAID ENTERED
AUG 05 2026

CURRENT CHARGES DETAIL

UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	GS - ELECTRIC		1,858.52
1.00	PPAC (.0317)		355.04

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com



7-28-26

CGC (610) 391-0600 SE-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	1000 UNION ST
BILLING DATE:	07/13/26

AMOUNT DUE

DUE DATE:	08/03/26
IF PAID ON OR BEFORE 08/03/26:	2,213.56
IF PAID AFTER 08/03/26:	2,213.56

AMOUNT ENCLOSED
2213.56

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - ADMIN BLDG
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON

1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	1000 UNION ST
BILLING DATE:	07/13/26
DUE DATE:	08/03/26

AMOUNT DUE

LAST PAYMENT:	DATE: 07/07/26	AMOUNT: 128.80
WATER PREVIOUS BALANCE:		0.00
SEWER PREVIOUS BALANCE:		0.00
ELECTRIC PREVIOUS BALANCE:		0.00
GARBAGE PREVIOUS BALANCE:		0.00
CURRENT CHARGES:		152.95
IF PAID ON OR BEFORE 08/03/26:		152.95
IF PAID AFTER 08/03/26:		152.95

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
WATER	01546145	06/05/26	6780	07/08/26	6840	6000

PAID
AUG 05 2026

ENTERED

CURRENT CHARGES DETAIL

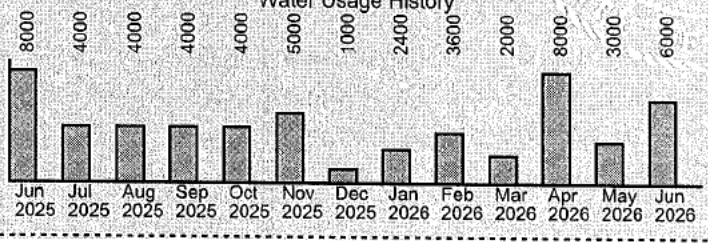
UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	1C1 - WATER		96.95
1.00	5/8C1 - SEWER		56.00

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com

7-28-26

Water Usage History



CGC (610) 391-0600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	1000 UNION ST
BILLING DATE:	07/13/26

AMOUNT DUE

DUE DATE:	08/03/26
IF PAID ON OR BEFORE 08/03/26:	152.95
IF PAID AFTER 08/03/26:	152.95

AMOUNT ENCLOSED
152.95

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - ADMIN BLDG
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	3 INDIAN LANE
BILLING DATE:	07/13/26
DUE DATE:	08/03/26

AMOUNT DUE

LAST PAYMENT:	TE: 07/07/26 AMOUNT: 22,274.61
WATER PREVIOUS BALANCE:	0.00
SEWER PREVIOUS BALANCE:	0.00
ELECTRIC PREVIOUS BALANCE:	0.00
GARBAGE PREVIOUS BALANCE:	0.00
CURRENT CHARGES:	27,232.15
IF PAID ON OR BEFORE 08/03/26:	27,232.15
IF PAID AFTER 08/03/26:	27,232.15

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
WATER	64528999	06/05/26	64845	07/08/26	66002	115700
ELECTRIC	02657021	06/05/26	37392	07/08/26	37979	140880

PAID
AUG 05 2026
ENTERED

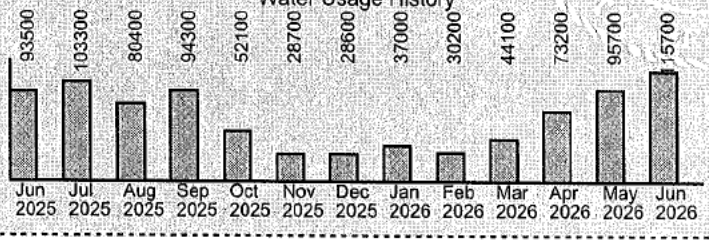
CURRENT CHARGES DETAIL

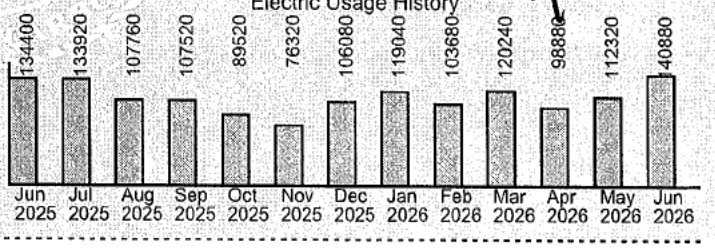
UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	4 - WATER		1,125.45
1.00	SEWER		488.80
1.00	GS2 - ELECTRIC		21,152.00
1.00	PPAC (.0317)		4,465.90

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com

7-28-26





CGC (610) 391-0600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	3 INDIAN LANE
BILLING DATE:	07/13/26

AMOUNT DUE

DUE DATE:	08/03/26
IF PAID ON OR BEFORE 08/03/26:	27,232.15
IF PAID AFTER 08/03/26:	27,232.15

AMOUNT ENCLOSED
27232.15

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - ELEMENTARY CENTER
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION	
ACCOUNT NO:	[redacted]
LOCATION:	3 INDIAN LANE
BILLING DATE:	07/20/26
DUE DATE:	08/10/26

AMOUNT DUE		
LAST PAYMENT:	DATE: 07/07/26	AMOUNT: 127.01
WATER PREVIOUS BALANCE:		0.00
CURRENT CHARGES:		127.01
IF PAID ON OR BEFORE 08/10/26:		127.01
IF PAID AFTER 08/10/26:		127.01

CURRENT METER ACTIVITY

Meter Num	PREVIOUS READING	CURRENT READING	USAGE

PAID
AUG 05 2026

ENTERED

CURRENT CHARGES DETAIL

UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	FIRE PROTECTION		127.01

SPECIAL MESSAGE

7-28-26

CGC (610) 391-0600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION	
ACCOUNT NO:	[redacted]
LOCATION:	3 INDIAN LANE
BILLING DATE:	07/20/26

AMOUNT DUE	
DUE DATE:	08/10/26
IF PAID ON OR BEFORE 08/10/26:	127.01
IF PAID AFTER 08/10/26:	127.01

AMOUNT ENCLOSED
127.01

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - ELEMENTARY CENTER
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	1 INDIAN LANE
BILLING DATE:	07/08/26
DUE DATE:	07/28/26

AMOUNT DUE

LAST PAYMENT:	TE: 07/07/26 AMOUNT: 16,562.20
WATER PREVIOUS BALANCE:	0.00
SEWER PREVIOUS BALANCE:	0.00
ELECTRIC PREVIOUS BALANCE:	0.00
GARBAGE PREVIOUS BALANCE:	0.00
CURRENT CHARGES:	14,626.37
IF PAID ON OR BEFORE 07/28/26:	14,626.37
IF PAID AFTER 07/28/26:	14,626.37

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
WATER	63541125	06/01/26	51123	07/01/26	51683	56000
ELECTRIC	01025005	06/01/26	60922	07/01/26	61027	75600

PAID
AUG 05 2026

ENTERED

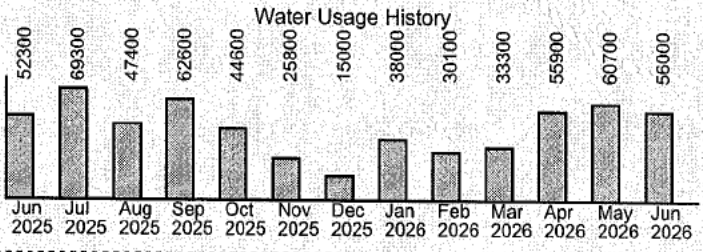
CURRENT CHARGES DETAIL

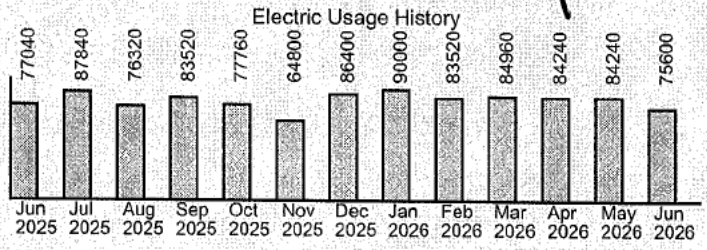
UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	3C2 - WATER		619.85
1.00	SEWER		250.00
1.00	GS2 - ELECTRIC		11,360.00
1.00	PPAC (.0317)		2,396.52

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com

7-28-26





OGC (610) 391-0000 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	1 INDIAN LANE
BILLING DATE:	07/08/26

AMOUNT DUE

DUE DATE:	07/28/26
IF PAID ON OR BEFORE 07/28/26:	14,626.37
IF PAID AFTER 07/28/26:	14,626.37

AMOUNT ENCLOSED
14626.37

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - HIGH SCHOOL
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO: [redacted]
LOCATION: 301 BEAVER RUN RD
BILLING DATE: 07/08/26
DUE DATE: 07/28/26

AMOUNT DUE

LAST PAYMENT:	TE: 07/07/26	AMOUNT: 13,153.40
WATER PREVIOUS BALANCE:		0.00
SEWER PREVIOUS BALANCE:		0.00
ELECTRIC PREVIOUS BALANCE:		0.00
GARBAGE PREVIOUS BALANCE:		0.00
CURRENT CHARGES:		13,538.48
IF PAID ON OR BEFORE 07/28/26:		13,538.48
IF PAID AFTER 07/28/26:		13,538.48

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
ELECTRIC	01040249	06/01/26	65893	07/01/26	66079	74400

PAID
AUG 05 2026
ENTERED

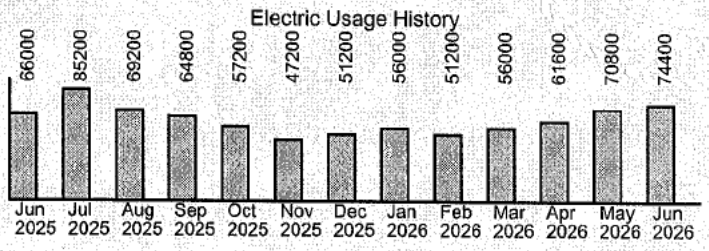
CURRENT CHARGES DETAIL

UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	GS2 - ELECTRIC		11,180.00
1.00	PPAC (.0317)		2,358.48

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com

7-28-26



OGC (610) 391-0600 SS-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO: [redacted]
BILLING DATE: 07/08/26

AMOUNT DUE

DUE DATE:	07/28/26
IF PAID ON OR BEFORE 07/28/26:	13,538.48
IF PAID AFTER 07/28/26:	13,538.48

AMOUNT ENCLOSED
13538.48

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - MIDDLE SCHOOL
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION	
ACCOUNT NO:	[redacted]
LOCATION:	MIDDLE SCHOOL
BILLING DATE:	07/20/26
DUE DATE:	08/10/26

AMOUNT DUE		
LAST PAYMENT:	DATE: 07/07/26	AMOUNT: 127.01
WATER PREVIOUS BALANCE:		0.00
CURRENT CHARGES:		127.01
IF PAID ON OR BEFORE 08/10/26:		127.01
IF PAID AFTER 08/10/26:		127.01

CURRENT METER ACTIVITY

Meter Num	PREVIOUS READING	CURRENT READING	USAGE

PAID
AUG 05 2026

ENTERED

CURRENT CHARGES DETAIL

UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	FIRE PROTECTION		127.01

SPECIAL MESSAGE

7-28-26

CGC (610) 391-0600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION	
ACCOUNT NO:	[redacted]
LOCATION:	MIDDLE SCHOOL
BILLING DATE:	07/20/26

AMOUNT DUE	
DUE DATE:	08/10/26
IF PAID ON OR BEFORE 08/10/26:	127.01
IF PAID AFTER 08/10/26:	127.01

AMOUNT ENCLOSED
127.01

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - MIDDLE SCHOOL
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	MIDDLE SCHOOL
BILLING DATE:	07/08/26
DUE DATE:	07/28/26

AMOUNT DUE

LAST PAYMENT:	DATE: 07/07/26	AMOUNT: 1,262.27
WATER PREVIOUS BALANCE:		0.00
SEWER PREVIOUS BALANCE:		0.00
ELECTRIC PREVIOUS BALANCE:		0.00
GARBAGE PREVIOUS BALANCE:		0.00
CURRENT CHARGES:		1,244.72
IF PAID ON OR BEFORE 07/28/26:		1,244.72
IF PAID AFTER 07/28/26:		1,244.72

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
WATER	54505922	06/01/26	67069	07/01/26	67847	77800

PAID
AUG 05 2026

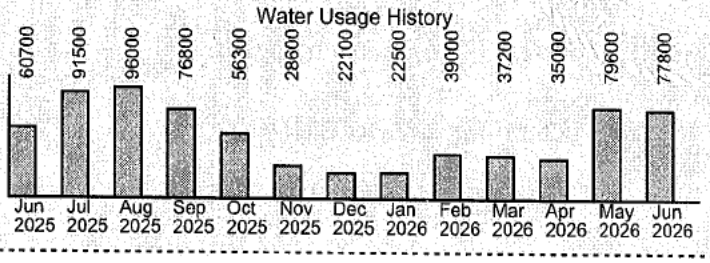
ENTERED

CURRENT CHARGES DETAIL

UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	4 - WATER		907.52
1.00	SEWER		337.20

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com



7-28-26

CDC (610) 391-9600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	MIDDLE SCHOOL
BILLING DATE:	07/08/26

AMOUNT DUE

DUE DATE:	07/28/26
IF PAID ON OR BEFORE 07/28/26:	1,244.72
IF PAID AFTER 07/28/26:	1,244.72

AMOUNT ENCLOSED
1244.72

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - MIDDLE SCHOOL
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON

1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

[redacted]

LOCATION:	[redacted] 9TH & UNION STS
BILLING DATE:	07/13/26
DUE DATE:	08/03/26

[redacted]

LAST PAYMENT:	DATE: 07/07/26 AMOUNT: 15.00
WATER PREVIOUS BALANCE:	0.00
SEWER PREVIOUS BALANCE:	0.00
ELECTRIC PREVIOUS BALANCE:	0.00
GARBAGE PREVIOUS BALANCE:	0.00
CURRENT CHARGES:	15.00
IF PAID ON OR BEFORE 08/03/26:	15.00
IF PAID AFTER 08/03/26:	15.00

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
ELECTRIC	99691269	06/05/26	43	07/08/26	43	0

PAID
AUG 05 2026

ENTERED

CURRENT CHARGES DETAIL

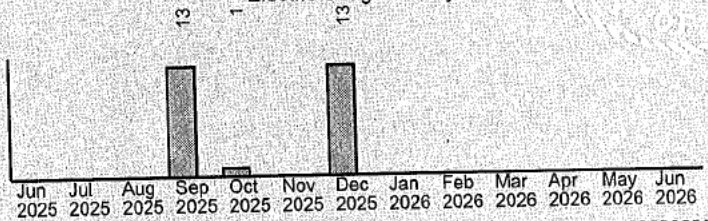
UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	GS - ELECTRIC		15.00

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com

7-28-26

Electric Usage History



CGC (610) 391-0600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	9TH & UNION STS
BILLING DATE:	07/13/26

AMOUNT DUE

DUE DATE:	08/03/26
IF PAID ON OR BEFORE 08/03/26:	15.00
IF PAID AFTER 08/03/26:	15.00

AMOUNT ENCLOSED
15.00

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - LIGHTED SIGN
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	BASEBALL FIELD
BILLING DATE:	07/13/26
DUE DATE:	08/03/26

AMOUNT DUE

LAST PAYMENT:	DATE: 07/07/26	AMOUNT: 15.00
WATER PREVIOUS BALANCE:		0.00
SEWER PREVIOUS BALANCE:		0.00
ELECTRIC PREVIOUS BALANCE:		0.00
GARBAGE PREVIOUS BALANCE:		0.00
CURRENT CHARGES:		15.00
IF PAID ON OR BEFORE 08/03/26:		15.00
IF PAID AFTER 08/03/26:		15.00

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
ELECTRIC	55568736	06/05/26	23776	07/08/26	23776	0

PAID
AUG 05 2026

ENTERED

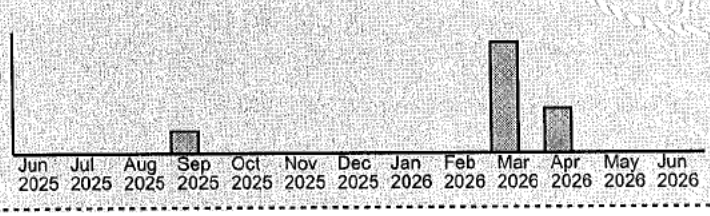
CURRENT CHARGES DETAIL

UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	GS - ELECTRIC		15.00

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com

Electric Usage History



7-28-26

CGC (610) 391-0600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	BASEBALL FIELD
BILLING DATE:	07/13/26

AMOUNT DUE

DUE DATE:	08/03/26
IF PAID ON OR BEFORE 08/03/26:	15.00
IF PAID AFTER 08/03/26:	15.00

AMOUNT ENCLOSED
15.00

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - BASEBALL FIELD
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	NEW STADIUM
BILLING DATE:	07/13/26
DUE DATE:	08/03/26

AMOUNT DUE

LAST PAYMENT:	ATE: 07/07/26 AMOUNT: 1,783.61
WATER PREVIOUS BALANCE:	0.00
SEWER PREVIOUS BALANCE:	0.00
ELECTRIC PREVIOUS BALANCE:	0.00
GARBAGE PREVIOUS BALANCE:	0.00
CURRENT CHARGES:	1,955.43
IF PAID ON OR BEFORE 08/03/26:	1,955.43
IF PAID AFTER 08/03/26:	1,955.43

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
WATER	0026074607	06/05/26	21193	07/09/26	21239	4600
ELECTRIC	05522126	06/05/26	25247	07/08/26	25350	8240

PAID ENTERED
AUG 05 2026

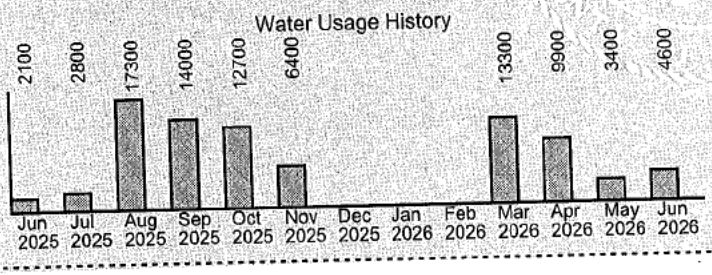
CURRENT CHARGES DETAIL

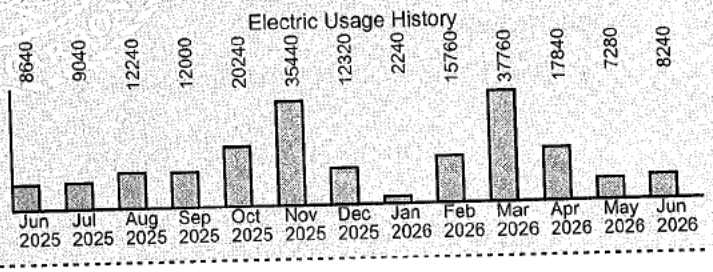
UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	3C2 - WATER		322.92
1.00	GS - ELECTRIC		1,371.30
1.00	PPAC (.0317)		261.21

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com

7-28-26





CGC (610) 391-0600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	NEW STADIUM
BILLING DATE:	07/13/26

AMOUNT DUE

DUE DATE:	08/03/26
IF PAID ON OR BEFORE 08/03/26:	1,955.43
IF PAID AFTER 08/03/26:	1,955.43

AMOUNT ENCLOSED
1955.43

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - NEW STADIUM
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

BOROUGH OF LEHIGHTON
1 Constitution Avenue
PO BOX 29
Lehighton, PA 18235
(610)377-4004

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	ATH FIELD (OLD)
BILLING DATE:	07/08/26
DUE DATE:	07/28/26

AMOUNT DUE

LAST PAYMENT:	DATE: 07/07/26	AMOUNT: 223.10
WATER PREVIOUS BALANCE:		0.00
SEWER PREVIOUS BALANCE:		0.00
ELECTRIC PREVIOUS BALANCE:		0.00
GARBAGE PREVIOUS BALANCE:		0.00
CURRENT CHARGES:		281.97
IF PAID ON OR BEFORE 07/28/26:		281.97
IF PAID AFTER 07/28/26:		281.97

CURRENT METER ACTIVITY

	Meter Num	PREVIOUS READING		CURRENT READING		USAGE
ELECTRIC	01040267	06/01/26	8070	07/01/26	8087	1360

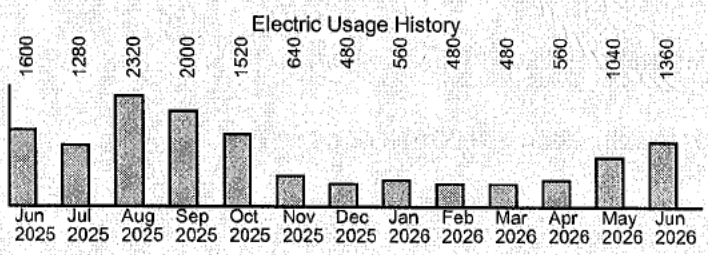
PAID
ENTERED AUG 05 2026

CURRENT CHARGES DETAIL

UNITS	DESCRIPTION	METER NUM	TOTAL
1.00	GS - ELECTRIC		238.86
1.00	PPAC (.0317)		43.11

SPECIAL MESSAGE

2025 Annual Water Quality Report
can be viewed online at www.lehightonwater.com



7-28-26

CGC (610) 391-0600 SB-L

PAYMENT COUPON - PLEASE DETACH AND RETURN THIS PORTION ALONG WITH YOUR PAYMENT

ACCOUNT INFORMATION

ACCOUNT NO:	[redacted]
LOCATION:	ATH FIELD (OLD)
BILLING DATE:	07/08/26

AMOUNT DUE

DUE DATE:	07/28/26
IF PAID ON OR BEFORE 07/28/26:	281.97
IF PAID AFTER 07/28/26:	281.97

AMOUNT ENCLOSED
281.97

MAKE CHECKS PAYABLE TO:

LEHIGHTON BOROUGH
1 CONSTITUTION AVENUE
PO BOX 29
LEHIGHTON, PA 18235

LASD - OLD ATH FIELD
1000 UNION ST
LEHIGHTON, PA 18235

PLEASE RETURN THIS STUB WITH YOUR PAYMENT

[redacted]

Pymt # 0010029788
08/05/2026

		Amount	Account Code	Description
OCCUPATION	07/17/2026	122.50	10-5130-880-000-00-000-000-090-0000	OCCUPATION TAX-2024 REFUND
	Payment Amount:	**122.50**		

[redacted]

Pymt # 0010029788
08/05/2026

		Amount	Account Code	Description
OCCUPATION	07/17/2026	122.50	10-5130-880-000-00-000-000-090-0000	OCCUPATION TAX-2024 REFUND
	Payment Amount:	**122.50**		

0010029788

08/05/2026

**********122.50

PAY One Hundred Twenty-Two and 50/100 Dollars

To the Order of:

[redacted]

NON-NEGOTIABLE

[redacted]

LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST

DATE: 7/17/26

AMOUNT: $122.50

REQUEST A CHECK FROM General **FUND PAYABLE TO:**

[redacted]

PAID
AUG 05 2026

REASON: 2024 Occupation Refund – No Income

SIGNATURE OF REQUESTOR: [signature]

SIGNATURE OF BUSINESS ADMINISTRATOR: [signature] 7/17/26

ACCOUNT CODE(S):

DEBIT:
10-5130-880-000-00-000-000-090-0000 – $122.50 - 2024 Occupation Refund - Retired

_____
(Date)

Lehighton Area School District
Business Administrator
1000 Union St.
Lehighton, PA 18235

PAID
AUG 05 2026

Dear Sir:

I am requesting a refund of my 2024
(Date of Tax Bill)

✓ Occupational Tax, _____ Per Capita Tax, _____ Real Estate Tax.

The tax was paid in error. As proof, I have attached a copy of my paid tax bill.

The reason for this request is NO income

I have attached documents to prove my eligibility for a refund.

Thank you in advance for your consideration.

[redacted]

_____
(Business Office Approval-Signature)

Vendor: GEORGES01-George's Transportation Inc
84 Ashtown Dr LEHIGHTON PA 18235-0000

Pymt # 0010029789
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
2439	05/29/2026		270.00	10-1110-519-000-30-800-000-080-0000	LHS TRIP
2464	07/21/2026		3036.35	10-2720-513-000-00-000-000-090-0000	FUEL ESCALATION JUNE 2026
	Payment Amount:		**3306.35**		*** Accrued A/P**

Vendor: GEORGES01-George's Transportation Inc
84 Ashtown Dr LEHIGHTON PA 18235-0000

Pymt # 0010029789
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
2439	05/29/2026		270.00	10-1110-519-000-30-800-000-080-0000	LHS TRIP
2464	07/21/2026		3036.35	10-2720-513-000-00-000-000-090-0000	FUEL ESCALATION JUNE 2026
	Payment Amount:		**3306.35**		*** Accrued A/P**

0010029789

08/05/2026

**********3,306.35

PAY Three Thousand Three Hundred Six and 35/100 Dollars

To the Order of:

George's Transportation Inc
84 Ashtown Dr
LEHIGHTON PA 18235-0000

NON-NEGOTIABLE

[redacted]

George's Transportation Co., Inc.
84 Ashtown Drive
Lehighton, PA 18235 USA
+16103775511
lgbusing@georgesbusing.com

INVOICE

BILL TO
Lehighton High School
1 Indian Lane
Lehighton, PA 18235

INVOICE 2439
DATE 05/29/2026

PAID
AUG 05 2026

ACTIVITY
LHS Trip

DATE	DESCRIPTION	QTY.	RATE	AMOUNT
05/27/2026	Coca-Cola Park	1	270.00	270.00

SUBTOTAL	270.00
TAX	0.00
TOTAL	270.00
BALANCE DUE	**$270.00**

PAID

7/6/24

George's Transportation Co., Inc.
84 Ashtown Drive
Lehighton, PA 18235 USA
+16103775511

INVOICE

BILL TO
LASD
Lehighton Area School District
1000 Union Street
Lehighton, PA 18235

INVOICE # 2464
DATE 07/21/2026

PAID
AUG 05 2026

ACTIVITY
Fuel Escalation June 2026

SERVICE	DESCRIPTION	QTY.	RATE	AMOUNT
Fuel Escalation	Fuel Escalation for June 2026	1	3,036.35	3,036.35

Please see the attached calculations.

SUBTOTAL	3,036.35
TAX	0.00
TOTAL	3,036.35
BALANCE DUE	**$3,036.35**

CJ 7/28/26

10-2720-513-000-00-000-000-0910-0000

George's Transportation Company, Inc.

Lehighton Area School District

2025-2026 School Year

June

Fuel Escalation & De-escalation

Month	Disc. Price Per Gallon DIESEL GAS	Escalation Over $3.809 De-escalation Under $3.709 $2.809	Gallons Used	Amount Due
June	$5.52	$1.711	1,707.24	$2,921.09
	$4.10	$0.291	396.09	$115.26
			Total Due	**$3,036.35**

PAID
AUG 05 2026

Vendor: HighmarkI-Highmark, Inc.
PO Box 223680 PITTSBURGH PA 15251-2680

Pymt # 0010029790
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
		Payment Amount:	370.50		
		SEE PAYMENT DETAIL LISTING			

Vendor: HighmarkI-Highmark, Inc.
PO Box 223680 PITTSBURGH PA 15251-2680

Pymt # 0010029790
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
		Payment Amount:	370.50		
		SEE PAYMENT DETAIL LISTING			

0010029790

08/05/2026

**********370.50

PAY Three Hundred Seventy and 50/100 Dollars

To the Order of:

Highmark, Inc.
PO Box 223680
PITTSBURGH PA 15251-2680

NON-NEGOTIABLE

[redacted]

Payment Detail Listing

Highmark, Inc. (HighmarkI)
PO Box 223680
PITTSBURGH PA 15251-2680

Payment Number: 0010029790
Payment Date: 08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
A260727746665	07/27/2026		2.85	10-3250-271-000-00-000-000-000-0000	Athletics Medical Ins
A260727746665	07/27/2026		5.70	10-2818-271-000-00-000-000-000-0000	TECHNOLOGY MEDICAL
A260727746665	07/27/2026		5.70	10-2620-271-000-20-500-000-000-0000	Oper Bld Srvs Medical MS
A260727746665	07/27/2026		5.70	10-2620-271-000-10-200-000-000-0000	Maint. Medical Elementary
A260727746665	07/27/2026		2.85	10-2620-271-000-00-000-000-000-0000	Maintenance Group Benefits
A260727746665	07/27/2026		2.85	10-2611-271-000-00-000-000-000-0000	Maint Medical
A260727746665	07/27/2026		5.70	10-2513-271-000-00-000-000-000-0000	Business Medical
A260727746665	07/27/2026		2.85	10-2440-271-000-30-800-000-000-0000	NURSE MEDICAL HIGH SCHOOL
A260727746665	07/27/2026		2.85	10-2440-271-000-20-500-000-000-0000	NURSE MEDICAL MIDDLE SCHOOL
A260727746665	07/27/2026		2.85	10-2440-271-000-10-200-000-000-0000	NURSE MEDICAL Elemtry
A260727746665	07/27/2026		2.85	10-2380-271-000-30-800-000-000-0000	PRINCIPAL MEDICAL H/SCHOOL
A260727746665	07/27/2026		2.85	10-2380-271-000-20-500-000-000-0000	PRINCIPAL MEDICAL M/SCHOOL
A260727746665	07/27/2026		5.70	10-2380-271-000-10-200-000-000-0000	Principal Medical Elementary
A260727746665	07/27/2026		2.85	10-2360-271-000-00-000-000-000-0000	SUPER/ASST MEDICAL
A260727746665	07/27/2026		2.85	10-2269-271-000-00-000-000-012-0000	Special Ed Office Medical
A260727746665	07/27/2026		2.85	10-2260-271-000-00-000-000-000-0000	CURR/GRANT MEDICAL
A260727746665	07/27/2026		2.85	10-2250-271-000-30-800-000-000-0000	LIBRARIAN MEDICAL HIGH SCHOOL
A260727746665	07/27/2026		2.85	10-2250-271-000-20-500-000-000-0000	LIBRARIAN MEDICAL M/S
A260727746665	07/27/2026		2.85	10-2250-271-000-10-200-000-000-0000	Librarian Medical Elementary
A260727746665	07/27/2026		2.85	10-2170-271-000-00-000-000-000-0000	PIMS Coordinator Medical
A260727746665	07/27/2026		2.85	10-2160-271-000-30-800-000-000-0000	Social Work Services Medical
A260727746665	07/27/2026		2.85	10-2160-271-000-20-500-000-000-0000	Social Work Services Medical
A260727746665	07/27/2026		2.85	10-2140-271-000-10-200-000-000-0000	Psychology Medical EC
A260727746665	07/27/2026		2.85	10-2120-271-000-30-800-000-000-0000	GUIDANCE MEDICAL HIGH SCHOOL
A260727746665	07/27/2026		5.70	10-2120-271-000-20-500-000-000-0000	GUIDANCE MEDICAL MIDDLE SCHOOL
A260727746665	07/27/2026		8.55	10-2120-271-000-10-200-000-000-0000	Guidance Medical Elementary
A260727746665	07/27/2026		2.85	10-1801-271-217-10-200-000-000-0000	Pre-K Medical - Elementary
A260727746665	07/27/2026		8.55	10-1241-271-000-30-800-000-000-0000	LEARNING SUPPORT MEDICAL H/S
A260727746665	07/27/2026		8.55	10-1241-271-000-20-500-000-000-0000	LEARNING SUPPORT MEDICAL M/S
A260727746665	07/27/2026		11.40	10-1241-271-000-10-200-000-000-0000	Learning Supp. Medical Element
A260727746665	07/27/2026		5.70	10-1231-271-000-30-800-000-000-0000	EMOTIOANL SUPPORT MEDICAL H/S
A260727746665	07/27/2026		2.85	10-1231-271-000-10-200-000-000-0000	Emotion Supp Medical Elementry
A260727746665	07/27/2026		2.85	10-1225-271-000-10-200-000-000-0000	Speech Medical Elementary
A260727746665	07/27/2026		2.85	10-1211-271-000-30-800-000-000-0000	LIFE SKILL MEDICAL H/S
A260727746665	07/27/2026		2.85	10-1211-271-000-20-500-000-000-0000	LIFE SKILLS MEDICAL M/S
A260727746665	07/27/2026		8.55	10-1211-271-000-10-200-000-000-0000	Life Skills Medical Elementary
A260727746665	07/27/2026		14.25	10-1110-271-222-10-200-000-000-0000	RTL Medical
A260727746665	07/27/2026		65.55	10-1110-271-000-30-800-000-000-0000	Instruction Medical HS
A260727746665	07/27/2026		62.70	10-1110-271-000-20-500-000-000-0000	Teacher Medical Ins MS
A260727746665	07/27/2026		74.10	10-1110-271-000-10-200-000-000-0000	Instruction Medical Elementary
	Payment Amount:		**370.50**		

Spending Account Processing

Spending Account Invoicing
Suite 1033, Team 1866
120 Fifth Avenue
Pittsburgh, PA 15222

Phone: (888) 334-4184

PSHIC Lehighton Area School District
Ed Rarick
1000 Union St
Lehighton PA, 18235

ADMINISTRATIVE FEES INVOICE

[redacted]

BILL ACCOUNT NAME:	PSHIC Lehighton Area School District	INVOICE NUMBER:	A26072746665
		INVOICE MONTH(S):	Jul 2026
		PREPARED DATE:	07/27/2026
CLIENT NAME:	PSHIC - Lehighton Area School District	PAYMENT DUE DATE:	08/21/2026

Prior Billing Information

Last Bill Amount	$282.15
Payments Received Through 07/26/2026	($282.15)

PAID
AUG 05 2026

Balance Forward **$0.00**

Current Charges

Premium Summary Ending Member Listing	$370.50

Total Current Charges **$370.50**

Total Due **$370.50**

PLEASE NOTE; IF YOU PAY VIA CHECK OR MONEY ORDER, PLEASE RETURN YOUR PAYMENT STUB AND PAYMENT IN THE WINDOW ENVELOPE PROVIDED AND MAKE SURE THAT THE ADDRESS SHOWS THROUGH THE WINDOW. Sending all payments to this address will ensure that all payments are processed and your account updated on a
***Additional messages (if any) can be found on page 2.

ef 7/28/26

DETACH AND RETURN THIS PORTION WITH PAYMENT

Spending Account Processing

MAKE CHECK PAYABLE TO "Highmark Inc"

Mail Payment to:
Highmark Inc P.O. Box 223680, Pittsburgh, PA 15251-2680

OVERNIGHT ADDRESS:
Highmark-Cash Processing 120 Fifth Avenue Place- Mail Code 915- Pittsburgh, PA 15222-3099

INVOICE NUMBER: A26072746665
BILL ACCOUNT NUMBER: 000116694A

AMOUNT PAID $ 370.50

PSHIC Lehighton Area School District
Ed Rarick
1000 Union St
Lehighton PA, 18235

INVOICE MONTH(S): Jul 2026
PAYMENT DUE DATE: 08/21/2026
TOTAL AMOUNT DUE: $370.50

If your contact information has changed, please send the updated information to SAPInvoicing@highmark.com

***Continued from page 1:

timely basis. If you pay via on line banking or by some other electronic means, please be sure to change the payment address to the address indicated also. Please make sure your billing ID number is listed on your check. For a detailed guide on understanding your invoice, please visit: employer.highmark.com/billingguidefi

Spending Account Processing

Highmark Inc
PO Box 223680
Pittsburgh, PA 15251-2680
Phone: (888)334-4184

Premium Summary

[redacted]

a School District

ea School District

INVOICE NUMBER: A26072746665
INVOICE MONTH(S): Jul 2026
PREPARED DATE: 07/27/2026

Product	Contract Type	Contract Count	Rate	Coverage Period	Current Premium
Group: 10572103 Product: HSA					
HSA			$2.85	07/01/2026 - 07/31/2026	$296.40
Product: HSA		104			$296.40
Group: 10572103	Actual Member Count:	104			$296.40
Group: 10572104 Product: HSA					
HSA			$2.85	07/01/2026 - 07/31/2026	$22.80
Product: HSA		8			$22.80
Group: 10572104	Actual Member Count:	8			$22.80
Group: 10572105 Product: HSA					
HSA			$2.85	07/01/2026 - 07/31/2026	$48.45
Product: HSA		17			$48.45
Group: 10572105	Actual Member Count:	17			$48.45
Group: 10572108 Product: HSA					

PAID
AUG 05 2026

HSA			$2.85	07/01/2026 - 07/31/2026	$2.85
Product: HSA		1			$2.85
Group: 10572108	**Actual Member Count:**	1			$2.85
Premium Total:					**$370.50**

Vendor: HUDL-HUDL
29775 Network Place CHICAGO IL 60673-1775

Pymt # 0010029791
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
HUS00013936	06/15/2026		17250.00	10-3250-610-000-30-800-002-000-0000	SOFTWARE 26/27
		Payment Amount:	**17250.00**		

Vendor: HUDL-HUDL
29775 Network Place CHICAGO IL 60673-1775

Pymt # 0010029791
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
HUS00013936	06/15/2026		17250.00	10-3250-610-000-30-800-002-000-0000	SOFTWARE 26/27
		Payment Amount:	**17250.00**		

0010029791

08/05/2026

**********17,250.00

PAY Seventeen Thousand Two Hundred Fifty and 00/100 Dollars

To the Order of:

HUDL
29775 Network Place
CHICAGO IL 60673-1775

NON-NEGOTIABLE

[redacted]

hudl

Hudl, Inc.

600 P Street
Lincoln, NE 68508
United States of America
Hudl Billing Support: 402-674-0499

PAID
AUG 05 2026

Invoice #: HUS00013936

Invoice Date: 06/15/2026
Due Date: 07/15/2026
[redacted] [redacted] [redacted]
Payment Terms: Net 30

Bill To: Lehighton High School
1 Indian Lane
Lehighton, PA 18235
United States of America

Ship To: Lehighton High School
1 INDIAN LN
LEHIGHTON, PA 18235
United States of America

Product Name	Service Period	Qty	Unit Price	Subtotal
Focus Indoor Software	07/15/2026 - 07/14/2027	1	3,000.00	3,000.00
High School Essential Athletic Department Package	07/15/2026 - 07/14/2027	1	8,500.00	8,500.00
Hudl Assist Football Unlimited Game + Scout Standard	07/15/2026 - 07/14/2027	1	700.00	700.00
Hudl Focus Point MA200 - Software	07/15/2026 - 07/14/2027	2	1,500.00	3,000.00
Hudl Gold	07/15/2026 - 07/14/2027	1	700.00	700.00
Hudl Gold Additional	07/15/2026 - 07/14/2027	3	450.00	1,350.00
Hudl Sideline Premium Software	07/15/2026 - 07/14/2027	1	0.00	0.00
Hudl Streaming 60	07/15/2026 - 07/14/2027	1	0.00	0.00

Invoice Total

Subtotal:	$	17,250.00
Sales Tax:	$	0.00
Total Amount:	**$**	**17,250.00**
Balance Due:	**$**	**17,250.00**

Payment by ACH / Wire:

Bank Name:	JPMorgan Chase Bank
Bank Address:	383 Madison Ave New York, NY 10179
Account Name:	Hudl, Inc.
Account Number:	659831215
Routing Number:	111000614
SWIFT Code:	CHASUS33

Send all payment remittance emails to USAccountsReceivable@Hudl.com

Pay Online:

You may now pay online at www.hudl.com/pay

Send Checks To:

Hudl, Inc.
29775 Network Place,
Chicago, IL 60673-1775
United States of America

INCLUDE INVOICE NUMBER ON CHECK

7/27/26

hudl

Tax Breakdown by Tax Rate

All taxes have already been applied to the balance shown on this invoice. The following list is a breakdown by rax rate for your records.

All amounts are in USD

Tax Name	Tax Rate Type	Tax Rate	Tax Amount
PENNSYLVANIA | PA STATE TAX	Percentage	6%	$0.00

Tax Breakdown by Product Class

Separately, the following list is a breakdown by sales tax product class for your records.

All amounts are in USD

Sales Tax Product Class	Tax Amount

Hudl, Inc. EIN is 26-0568054. Go to hudl.com/p/w9 for a copy of Hudl's W9.

W9 Address:
Hudl, Inc
600 P Street, Ste 400
Lincoln, NE 68508

Payments and Adjustments

All payments and adjustments have already been applied to the balance shown on this invoice. The following list is for your records.

All amounts are in USD

Date	Transaction Number	Type	Notes	Applied Amount
No payments or adjustments have been applied to this invoice.				

Vendor: LEHIGH 01-Lehigh Carbon Community College
4525 Education Park Dr SCHNECKSVILLE PA 18078-2598

Pymt # 0010029792
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
WKHJUL2426E	07/24/2026		15257.50	10-1693-566-000-00-000-000-090-0000	MONTHLY OPERATING EXPENSE-JUL
		Payment Amount:	**15257.50**		

Vendor: LEHIGH 01-Lehigh Carbon Community College
4525 Education Park Dr SCHNECKSVILLE PA 18078-2598

Pymt # 0010029792
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
WKHJUL2426E	07/24/2026		15257.50	10-1693-566-000-00-000-000-090-0000	MONTHLY OPERATING EXPENSE-JUL
		Payment Amount:	**15257.50**		

0010029792

08/05/2026

*****************15,257.50**

PAY Fifteen Thousand Two Hundred Fifty-Seven and 50/100 Dollars

To the Order of:

Lehigh Carbon Community College
4525 Education Park Dr
SCHNECKSVILLE PA 18078-2598

NON-NEGOTIABLE

[redacted]

Lehigh Carbon COMMUNITY COLLEGE

4525 Education Park Drive, Schnecksville, PA 18078

Invoice No. WKHJUL2426E

INVOICE

Customer

Name: Lehighton School District
Address: 1000 Union Street
City: Lehighton State: PA ZIP: 18235
Phone:

Date: 7/24/2026
Order No.:
Rep:

Qty	Description	Unit Price	TOTAL
	Monthly Billing		
1	**2026/2027 Operating Expense** **July 2026**	**$15,257.50**	**$15,257.50**
	10-1693-5660-000-00-000-000-090		
	PAID AUG 05 2026		
		SubTotal	$15,257.50
		TOTAL	**$15,257.50**

CJ 8/4/26

Office Use Only: SPOP - L00000051

Please make checks payable to Lehigh Carbon Community College! Federal ID #23-1670163

610-799-1157 BUSINESS OFFICE

NET 30 DAYS

Thank you!

Vendor: LEHIGH 01-Lehigh Carbon Community College
4525 Education Park Dr SCHNECKSVILLE PA 18078-2598

Pymt # 0010029793
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
WKHJULY24261	07/24/2026		21761.00	10-1700-566-000-00-000-000-090-0000	CAPITAL DEBT SERVICE 26/27
		Payment Amount:	**21761.00**		

Vendor: LEHIGH 01-Lehigh Carbon Community College
4525 Education Park Dr SCHNECKSVILLE PA 18078-2598

Pymt # 0010029793
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
WKHJULY24261	07/24/2026		21761.00	10-1700-566-000-00-000-000-090-0000	CAPITAL DEBT SERVICE 26/27
		Payment Amount:	**21761.00**		

0010029793

08/05/2026

*****************21,761.00**

PAY Twenty-One Thousand Seven Hundred Sixty-One and 00/100 Dollars

To the Order of:

Lehigh Carbon Community College
4525 Education Park Dr
SCHNECKSVILLE PA 18078-2598

NON-NEGOTIABLE

[redacted]

Lehigh Carbon
COMMUNITY COLLEGE

Invoice No. WKHJULY2426E1

4525 Education Park Drive, Schnecksville, PA 18078

INVOICE

Customer

Name Lehighton School District
Address 1000 Union Street
City Lehighton State PA ZIP 18235
Phone

Date 7/24/2026
Order No.
Rep

Qty	Description	Unit Price	TOTAL
	Semiannual Billing		
1	**2026/2027 Capital Debt Svc and Lease Appropriation July 2026**	**$21,761.00**	**$21,761.00**

10-1700-566-000-00-000-000-000

PAID
AUG 05 2026

CJ
8/4/26

SubTotal	**$21,761.00**
TOTAL	**$21,761.00**

Office Use Only: SPCP - L00000051

Please make checks payable to Lehigh Carbon Community College! Federal ID #23-1670163

610-799-1157 BUSINESS OFFICE

NET 30 DAYS

Thank you!

Vendor: LeonAGeo-Leon A George II, School Buses, Inc
660 Delaware Ave PALMERTON PA 18071

Pymt # 0010029794
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
5015	06/15/2026		312.00	10-2720-513-411-10-200-000-090-0000	HOMELESS TRANSPORTATION-JUNE
	Payment Amount:		**312.00**		*** Accrued A/P**

Vendor: LeonAGeo-Leon A George II, School Buses, In
660 Delaware Ave PALMERTON PA 18071

Pymt # 0010029794
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
5015	06/15/2026		312.00	10-2720-513-411-10-200-000-090-0000	HOMELESS TRANSPORTATION-JUNE
	Payment Amount:		**312.00**		*** Accrued A/P**

0010029794

08/05/2026

**********312.00

PAY Three Hundred Twelve and 00/100 Dollars

To the Order of:

Leon A George II, School Buses, Inc
660 Delaware Ave
PALMERTON PA 18071

NON-NEGOTIABLE

[redacted]

Leon A George II, School Buses, Inc.
660 Delaware Ave.
Palmerton, PA 18071
+16108267684
lgbusing@georgesbusing.com

PAID

INVOICE

BILL TO
LASD
1000 Union St.
Lehighton, PA 18235

INVOICE 5015
DATE 06/15/2026

PAID
AUG 05 2026

RE :
Hmlss Shttl

DESCRIPTION	AMOUNT
[redacted]	312.00

Mileage:
Odometer Readings as of 09/2025
Garage Odometer: 77.6 - Last Stop Odometer (Forest St. & Towamensing) 64.2 = 13.4 Miles

Homeless Odometer as of 02/18/2026
Garage Odometer: 38607 - Last Stop Odometer (Forest St. & Towamensing) 38574 = 43.0 Miles

Hmlss Miles 43.0 Miles - Sept. Odometer 13.4 Miles = 29.6 Additional Miles

---

Have a Great Day

BALANCE DUE **$312.00**

6/16/26

Vendor: MACOLINO-Macolino Risk Management Inc
402 Lakeside Office Park SOUTHAMPTON PA 18966

Pymt # 0010029795
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
20004055	07/29/2026		30143.75	10-1110-260-000-00-000-000-000-0000	WORKERS' COMPENSATION-2ND INST
		Payment Amount:	**30143.75**		

Vendor: MACOLINO-Macolino Risk Management Inc
402 Lakeside Office Park SOUTHAMPTON PA 18966

Pymt # 0010029795
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
20004055	07/29/2026		30143.75	10-1110-260-000-00-000-000-000-0000	WORKERS' COMPENSATION-2ND INST
		Payment Amount:	**30143.75**		

0010029795

08/05/2026

*****************30,143.75**

PAY Thirty Thousand One Hundred Forty-Three and 75/100 Dollars

To the Order of:

Macolino Risk Management Inc
402 Lakeside Office Park
SOUTHAMPTON PA 18966

NON-NEGOTIABLE

[redacted]

Macolino Inc.
RISK MANAGEMENT

402 Lakeside Office Park
Southampton, PA 18966

Phone 215.357.6701

Lehighton Area School District
1000 Union Street
Lehighton, PA 18235-1700

Invoice

PAID
AUG 05 2026

DATE	INVOICE #
7/29/2026	20004055

EFFECTIVE DATE	POLICY NUMBER	COMPANY
09-01-2026	[redacted]	CM Regent Insurance Company

EXPIRATION DATE	POLICY TYPE	TRANSACTION
07-01-2027	Workers' Compensation	2nd Installment

AMOUNT
30,143.75

Please return invoice copy with check payable to Macolino Risk Management, Inc.

lz 8/4/26

Vendor: MCNEESWAN-McNees Wallace & Nurick LLC
100 Pine Street PO Box 1166 HARRISBURG PA 17108

Pymt # 0010029796
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
5468720	07/21/2026		475.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		150.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		200.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		50.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		75.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		3650.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
	Payment Amount:		**4600.00**		*** Accrued A/P**

Vendor: MCNEESWAN-McNees Wallace & Nurick LLC
100 Pine Street PO Box 1166 HARRISBURG PA 17108

Pymt # 0010029796
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
5468720	07/21/2026		475.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		150.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		200.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		50.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		75.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
5468720	07/21/2026		3650.00	10-2350-331-000-00-000-000-090-0000	LEGAL BILL
	Payment Amount:		**4600.00**		*** Accrued A/P**

0010029796

08/05/2026

**********4,600.00

PAY Four Thousand Six Hundred and 00/100 Dollars

To the Order of:

McNees Wallace & Nurick LLC
100 Pine Street
PO Box 1166
HARRISBURG PA 17108

NON-NEGOTIABLE

[redacted]

McNees
Wallace & Nurick LLC

PO Box 1166
Harrisburg, PA 17108-1166
Phone: 717.232.8000
EIN: 23-1256003

Jeffrey Sultanik
Direct Dial: 484-533-0161
Jeffrey.Sultanik@mcneeslaw.com

Lehighton Area School District
Matthew Lentz, Consulting Business Manager
1000 Union Street
Lehighton, PA 18235

July 21, 2026
Invoice #5468720

EJ 7/28/26

Client No.: [redacted] Lehighton Area School District

Payment Due Upon Receipt

This Invoice is for the Period Ending: June 30, 2026

Matter Number	Matter Name	Fees Billed	Costs Billed
21792.0002	2025-2026 General Solicitorship	3,650.00	0.00
21792.0004	[redacted]	75.00	0.00
21792.0009	BOROUGH OF LEHIGHTON - OCCUPANCY PERMIT AND TRAFFIC SIGNAL INSTALLATION AND MAINTENANCE AGREEMENT, Fox File No.344207.00008	50.00	0.00
21792.0016	Release of Social Security Numbers	200.00	0.00
21792.0017	2027 Assessment Appeals	150.00	0.00
21792.0018	[redacted]	475.00	0.00
TOTALS		**$4,600.00**	**$0.00**

TOTAL AMOUNT DUE FOR THIS INVOICE $4,600.00

PAID
AUG 05 2026

Payments Attention: Accounting Department
P.O. Box 1166 • Harrisburg, PA 17108-1166
TELEPHONE: (717) 232-8000 • FAX: (717) 237-5300

Details for Matter 21792.0002 – 2025-2026 General Solicitorship

PAID
AUG 05 2026

Professional Services Rendered:

06/01/26	J. Sultanik	Email re Open AI Client Alert	0.20	50.00
06/08/26	J. Sultanik	Telephone conference with J. Moser re preparation for executive session and meeting	0.40	100.00
06/08/26	J. Sultanik	Attend special Board meeting and work session; provide advice to the Board	3.40	850.00
06/19/26	J. Sultanik	Legal research re budget, 8% calculation on estimated amount, and transfer to be addressed at the meeting	0.50	125.00
06/22/26	B. Shore	Attend Board meeting	1.90	475.00
06/24/26	A. Berman	receipt and review of formal demand letter; further discussions re same	0.40	100.00
06/24/26	A. Berman	receipt and review of draft emergency mandamus complaint	0.50	125.00
06/24/26	A. Berman	review and comment re tax bills and spending by the district pending budget passage	0.20	50.00
06/24/26	A. Berman	strategize re options for the district and best outcomes for each; telephone call with superintendent; draft notice	1.40	350.00
06/24/26	A. Berman	receive and review email exchange with district re budget timeline and PDE requirements; re-check PDE requirements and statutory underpinnings	0.50	125.00
06/24/26	A. Berman	email outline of requirements to go into next year with a required budget	0.30	75.00
06/24/26	J. Sultanik	Prepare legal opinion and draft response to Board Member re budget adoption procedures and filing of 2028 forms with the Department of Education; email to J. Moser and firm attorney re same	0.90	225.00
06/24/26	J. Sultanik	Email re transition issues	0.30	75.00
06/24/26	J. Sultanik	Legal research re publishing a notice of intent to increase taxes and failure to publicly advertise the same; email to J. Moser re implications of same	0.70	175.00
06/24/26	B. Shore	Email chain and telephone conferences re budget voting issue	0.50	125.00
06/26/26	A. Berman	receipt and review of multiple communications from objector to budget process; discuss options for curing and issues with same	1.30	325.00
06/30/26	J. Sultanik	Email re development of board re-adoption resolution; email J. Moser and client re same	0.30	75.00

This Invoice is for the Period Ending: June 30, 2026

06/30/26	P. Byrne	Analyze emails and documents re budget approval and chronology; prepare draft board resolution for attorney review	0.90	225.00

TOTAL FEES **$3,650.00**

TIMEKEEPER SUMMARY

Timekeeper	Title	Hours	Rate	Fees
Berman, A.	Member	4.60	$250.00	$1,150.00
Sultanik, J.	Member	6.70	$250.00	$1,675.00
Shore, B.	Of Counsel	2.40	$250.00	$600.00
Byrne, P.	Paralegal	0.90	$250.00	$225.00
TOTALS		**14.60**		**$3,650.00**

TOTAL AMOUNT DUE FOR THIS MATTER $3,650.00

PAID
AUG 05 2026

This Invoice is for the Period Ending: June 30, 2026

Details for Matter 21792.0004 – [redacted]

Professional Services Rendered:

06/08/26	A. DeTreux	Review and respond to email from J. Moser re update on the hiring process for the cheerleading coach position	0.20	50.00
06/10/26	A. DeTreux	Receive and review email from J. Moser re update that Sterner has not been hired as cheerleading coach for next year	0.10	25.00

PAID
AUG 05 2026

TOTAL FEES **$75.00**

TIMEKEEPER SUMMARY

Timekeeper	Title	Hours	Rate	Fees
DeTreux, A.	Associate	0.30	$250.00	$75.00
TOTALS		**0.30**		**$75.00**

TOTAL AMOUNT DUE FOR THIS MATTER $75.00

This Invoice is for the Period Ending: June 30, 2026

Details for Matter 21792.0009 – BOROUGH OF LEHIGHTON - OCCUPANCY PERMIT AND TRAFFIC SIGNAL INSTALLATION AND MAINTENANCE AGREEMENT, Fox File No.344207.00008

Professional Services Rendered:

06/01/26	L. Szczesny	Review of email from Jason Moser re: status of traffic signal project and discussions with representatives from PennDOT.	0.10	25.00
06/08/26	L. Szczesny	Review of email from Jason Moser re: status of traffic signal project.	0.10	25.00

TOTAL FEES **$50.00**

TIMEKEEPER SUMMARY

Timekeeper	Title	Hours	Rate	Fees
Szczesny, L.	Of Counsel	0.20	$250.00	$50.00
TOTALS		**0.20**		**$50.00**

TOTAL AMOUNT DUE FOR THIS MATTER $50.00

PAID
AUG 05 2026

This Invoice is for the Period Ending: June 30, 2026

Details for Matter 21792.0016 – Release of Social Security Numbers

Professional Services Rendered:

06/10/26	D. Chwastyk	Correspondence with J. Moser re response to D. Bradley re board member inquiry re data posted on website	0.30	75.00
06/10/26	J. Sultanik	Review of D. Bradley's email re release of Board Members' social security numbers	0.30	75.00
06/10/26	J. Sultanik	Email re responding to D. Bradley	0.20	50.00

TOTAL FEES **$200.00**

TIMEKEEPER SUMMARY

Timekeeper	Title	Hours	Rate	Fees
Chwastyk, D.	Member	0.30	$250.00	$75.00
Sultanik, J.	Member	0.50	$250.00	$125.00
TOTALS		**0.80**		**$200.00**

TOTAL AMOUNT DUE FOR THIS MATTER $200.00

PAID
AUG 05 2026

This Invoice is for the Period Ending: June 30, 2026

Details for Matter 21792.0017 – 2027 Assessment Appeals

Professional Services Rendered:

06/24/26	D. Comer	Obtain and review common level ratio applicable for Carbon County for 2027 tax year; obtain and review assessment appeal filing information for Carbon County; email correspondence to Matt Lentz with updated common level ratio and re: potential School District-initiated assessment appeals	0.60	150.00

TOTAL FEES **$150.00**

TIMEKEEPER SUMMARY

Timekeeper	Title	Hours	Rate	Fees
Comer, D.	Of Counsel	0.60	$250.00	$150.00
TOTALS		**0.60**		**$150.00**

TOTAL AMOUNT DUE FOR THIS MATTER $150.00

PAID
AUG 05 2026

This Invoice is for the Period Ending: June 30, 2026

Details for Matter 21792.001 [redacted]

Professional Services Rendered:

04/17/26	A. Spurlock	Email opposing counsel re complaint and exhibits	0.20	50.00
05/26/26	A. Spurlock	Call with Jeff re preparation for board meeting on Bradley issue; review emails from board members re status of Bradley issue; prepare for meeting; review court orders and resolution in preparation of board meeting	1.70	425.00

TOTAL FEES **$475.00**

TIMEKEEPER SUMMARY

Timekeeper	Title	Hours	Rate	Fees
Spurlock, A.	Of Counsel	1.90	$250.00	$475.00
TOTALS		**1.90**		**$475.00**

TOTAL AMOUNT DUE FOR THIS MATTER $475.00

PAID
AUG 05 2026

Vendor: MetLife-MetLife
PO Box 360905 PITTSBURGH PA 15251

Pymt # 0010029797
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
5395922-JULY	08/04/2026		5546.24	10-0462-214-000-00-000-000-000-0000	LEHIGHTON AREA SD #5395922-JUL
		Payment Amount:	**5546.24**		

Vendor: MetLife-MetLife
PO Box 360905 PITTSBURGH PA 15251

Pymt # 0010029797
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
5395922-JULY	08/04/2026		5546.24	10-0462-214-000-00-000-000-000-0000	LEHIGHTON AREA SD #5395922-JUL
		Payment Amount:	**5546.24**		

0010029797

08/05/2026

******************5,546.24**

PAY Five Thousand Five Hundred Forty-Six and 24/100 Dollars

To the Order of:

MetLife
PO Box 360905
PITTSBURGH PA 15251

NON-NEGOTIABLE

[redacted]

Coverage	Age Range	Class	Coverage Tier	Coverages	Volume	Premium (Monthly)
Critical Illness - Best	25-29	Act 93/Business Adminis	Employee Only	1	30,000.00	23.40
Critical Illness - Best	40-44	Act 93/Business Adminis	Employee + Spouse	1	30,000.00	109.20
Critical Illness - Best	35-39	Act 93/Business Adminis	Employee + Family	2	60,000.00	179.40
Accident - Best	25-29	Act 93/Business Adminis	Employee Only	1	30,000.00	26.35
Accident - Best	40-44	Act 93/Business Adminis	Employee + Spouse	1	30,000.00	61.65
Accident - Best	35-39	Act 93/Business Adminis	Employee + Family	2	60,000.00	146.12
Critical Illness - Better	60-64	Support	Employee + Spouse	1	20,000.00	187.20
Critical Illness - Better	25-29	Act 93/Business Adminis	Employee Only	1	20,000.00	15.60
Critical Illness - Better	50-54	Act 93/Business Adminis	Employee Only	1	20,000.00	66.80
Critical Illness - Better	35-39	Act 93/Business Adminis	Employee + Spouse	1	20,000.00	51.20
Critical Illness - Better	40-44	Act 93/Business Adminis	Employee + Family	1	20,000.00	82.40
Accident - Better	60-64	Support	Employee + Spouse	1	20,000.00	49.53
Accident - Better	25-29	Act 93/Business Adminis	Employee Only	1	20,000.00	25.22
Accident - Better	50-54	Act 93/Business Adminis	Employee Only	1	20,000.00	25.22
Accident - Better	35-39	Act 93/Business Adminis	Employee + Spouse	1	20,000.00	49.53
Accident - Better	40-44	Act 93/Business Adminis	Employee + Family	1	20,000.00	70.29
Critical Illness - Good	Under 25	Support	Employee Only	1	10,000.00	6.50
Critical Illness - Good	40-44	Support	Employee Only	2	20,000.00	37.20
Critical Illness - Good	45-49	Support	Employee Only	2	20,000.00	51.20
Critical Illness - Good	55-59	Support	Employee Only	1	10,000.00	41.20
Critical Illness - Good	60-64	Support	Employee Only	1	10,000.00	48.10
Critical Illness - Good	55-59	Support	Employee + Family	1	10,000.00	84.50
Critical Illness - Good	Under 25	Act 93/Business Adminis	Employee Only	2	20,000.00	13.00
Critical Illness - Good	25-29	Act 93/Business Adminis	Employee Only	5	50,000.00	39.00
Critical Illness - Good	30-34	Act 93/Business Adminis	Employee Only	1	10,000.00	10.00
Critical Illness - Good	35-39	Act 93/Business Adminis	Employee Only	2	20,000.00	26.00
Critical Illness - Good	40-44	Act 93/Business Adminis	Employee Only	4	40,000.00	74.40
Critical Illness - Good	45-49	Act 93/Business Adminis	Employee Only	5	50,000.00	128.00
Critical Illness - Good	50-54	Act 93/Business Adminis	Employee Only	6	60,000.00	200.40
Critical Illness - Good	55-59	Act 93/Business Adminis	Employee Only	3	30,000.00	123.60
Critical Illness - Good	60-64	Act 93/Business Adminis	Employee Only	4	40,000.00	192.40
Critical Illness - Good	45-49	Act 93/Business Adminis	Employee + Spouse	1	10,000.00	50.30
Critical Illness - Good	50-54	Act 93/Business Adminis	Employee + Spouse	2	20,000.00	130.00
Critical Illness - Good	40-44	Act 93/Business Adminis	Employee + Children	1	10,000.00	23.00
Critical Illness - Good	45-49	Act 93/Business Adminis	Employee + Children	1	10,000.00	29.90
Critical Illness - Good	50-54	Act 93/Business Adminis	Employee + Children	1	10,000.00	37.70
Accident - Good	Under 25	Support	Employee Only	1	10,000.00	24.48
Accident - Good	40-44	Support	Employee Only	2	20,000.00	48.96
Accident - Good	45-49	Support	Employee Only	2	20,000.00	48.96
Accident - Good	55-59	Support	Employee Only	1	10,000.00	24.48
Accident - Good	60-64	Support	Employee Only	1	10,000.00	24.48
Accident - Good	55-59	Support	Employee + Family	1	10,000.00	68.86
Accident - Good	Under 25	Act 93/Business Adminis	Employee Only	2	20,000.00	48.96
Accident - Good	25-29	Act 93/Business Adminis	Employee Only	5	50,000.00	122.40
Accident - Good	30-34	Act 93/Business Adminis	Employee Only	1	10,000.00	24.48
Accident - Good	35-39	Act 93/Business Adminis	Employee Only	2	20,000.00	48.96
Accident - Good	40-44	Act 93/Business Adminis	Employee Only	4	40,000.00	97.92
Accident - Good	45-49	Act 93/Business Adminis	Employee Only	5	50,000.00	122.40
Accident - Good	50-54	Act 93/Business Adminis	Employee Only	6	60,000.00	146.88
Accident - Good	55-59	Act 93/Business Adminis	Employee Only	3	30,000.00	73.44
Accident - Good	60-64	Act 93/Business Adminis	Employee Only	4	40,000.00	97.92
Accident - Good	45-49	Act 93/Business Adminis	Employee + Spouse	1	10,000.00	48.40
Accident - Good	50-54	Act 93/Business Adminis	Employee + Spouse	2	20,000.00	96.80
Accident - Good	40-44	Act 93/Business Adminis	Employee + Children	1	10,000.00	56.38
Accident - Good	45-49	Act 93/Business Adminis	Employee + Children	1	10,000.00	56.38
Accident - Good	50-54	Act 93/Business Adminis	Employee + Children	1	10,000.00	56.38
Hospital Indemnity - Best Plan		Act 93/Business Adminis	Employee + Family	2	0.00	246.22
Hospital Indemnity - Better Plan		Act 93/Business Adminis	Employee Only	3	0.00	106.47
Hospital Indemnity - Better Plan		Act 93/Business Adminis	Employee + Spouse	1	0.00	72.80
Hospital Indemnity - Better Plan		Act 93/Business Adminis	Employee + Family	1	0.00	92.26
Hospital Indemnity - Good Plan		Support	Employee Only	4	0.00	86.32
Hospital Indemnity - Good Plan		Support	Employee + Family	1	0.00	56.12
Hospital Indemnity - Good Plan		Act 93/Business Adminis	Employee Only	25	0.00	539.50
Hospital Indemnity - Good Plan		Act 93/Business Adminis	Employee + Spouse	3	0.00	132.99
Hospital Indemnity - Good Plan		Act 93/Business Adminis	Employee + Children	1	0.00	33.41
Hospital Indemnity - Good Plan		Act 93/Business Adminis	Employee + Family	6	0.00	336.72
	Totals:			**157**	**$1,360,000.00**	**$5,546.24**

[redacted]

Vendor: NRGBUM-NRG Business Marketing
PO Box 32179 NEW YORK NY 10087

Pymt # 0010029798
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
HS65542111	07/17/2026		849.59	10-2620-621-000-10-200-000-026-0000	NATURAL GAS-EC
HS65542111	07/17/2026		29.49	10-2620-621-000-00-100-000-026-0000	NATURAL GAS-ADMIN
		Payment Amount:	**879.08**		

Vendor: NRGBUM-NRG Business Marketing
PO Box 32179 NEW YORK NY 10087

Pymt # 0010029798
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
HS65542111	07/17/2026		849.59	10-2620-621-000-10-200-000-026-0000	NATURAL GAS-EC
HS65542111	07/17/2026		29.49	10-2620-621-000-00-100-000-026-0000	NATURAL GAS-ADMIN
		Payment Amount:	**879.08**		

0010029798

08/05/2026

**********879.08

PAY Eight Hundred Seventy-Nine and 08/100 Dollars

To the Order of:

NRG Business Marketing
PO Box 32179
NEW YORK NY 10087

NON-NEGOTIABLE

[redacted]

Invoice #: HS65542111

[redacted]

Invoice Date: 07/17/2026

Payment Due Date: 08/01/2026

CUSTOMER INFORMATION

0000385 T3 0 0759 18235-170000 -C01-P00385-I1

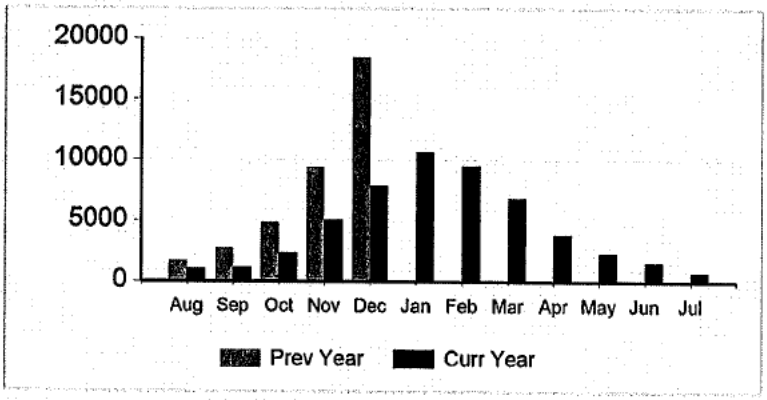
Lehighton Area School District
1000 Union Street
LEHIGHTON, PA 18235-1700

PAID

AUG 05 2026

USAGE HISTORY

Monthly Gas (THERMS)



INVOICE SUMMARY

Previous Balance	$1,041.63
Payment Received (Jul 07, 2026)	($1,041.63)
Total Balance Forward	**$0.00**
Adjustments	$0.00
Late Payment Charge	$0.00
Current Usage Charges	$879.08
Total Current Charges	**$879.08**

Amount Due by Aug 01, 2026 **$879.08**

PAYMENT OPTIONS

By web	nrg.com/myaccount
By phone	1.844.737.6742
By mail	Remittance slip below

QUESTIONS?

Visit Us	nrg.com/myaccount
Call Us	1.844.737.6742

MESSAGE CENTER

Let's grow together!

Expanding your reach? We're here to provide energy solutions for your locations in other states and/or your additional accounts. Lean on our expertise across North America. Call 855-464-2986 or email USNbusinessdirect@nrg.com.

8.4.26

Detach here and return this portion with check or money order. Do not staple or fold.

Invoice #: HS65542111

Account # : [redacted]

Amount Due by Aug 01, 2026 **$879.08**

Amount Enclosed 879.08

Please write your account number on your check or money order made payable to NRG Business Marketing.

Lehighton Area School District

1000 Union Street
LEHIGHTON, PA 18235

Check Remittance To:

NRG Business Marketing
P.O. Box 32179
New York,NY 10087-2179

0759-01-00-0000385-0001-0000918

IF YOU SUSPECT A NATURAL GAS LEAK, SMELL GAS OR HAVE ANY OTHER GAS RELATED EMERGENCIES, PLEASE DIAL 911 OR CONTACT YOUR LOCAL DISTRIBUTION UTILITY COMPANY.

GENERAL INFORMATION

If you end your service with NRG prior to the end of your agreement term, you may be charged an early termination fee. Please refer to your agreement for additional information.

In the event that the Term of your Agreement has expired, your account will be invoiced at a Market Based Rate or dropped.

DEFINITIONS

Board of Public Utilities – State agency responsible for regulating local utility companies. (May also be called Public Service Commission).

Burner Tip – Point where natural gas is ultimately used by the customer (the meter).

CCF – 100 cubic feet. This is a measure of gas usage.

City Gate – Physical connection of an interstate pipeline and the pipeline of the local natural gas utility.

Commodity Charge – The cost of natural gas provided to you during the billing period.

GSA (Gas Settlement Adjustment) – charge or credit for the value of natural gas usage that differs from contracted volume.

Late Payment Charges – Charges for payment of a billed amount after the due date specified on the customer's invoice. Late payment charges may apply as specified in your contract with NRG.

DEFINITIONS CONTINUED

Line Loss – The difference between the amount of natural gas brought to the city gate, versus the amount of natural gas usage report at the meter (burner tip). Line loss was previously included in your local pricing. Line loss is a regulated charge based on percentages determined by each utility to compensate for the utility's pipeline system loss.

Local Distribution Company (LDC) Charges – The fee assessed by the local utility for delivery of natural gas to the customer's home or business through the utility's distribution lines. In most cases this charge is billed separately by the utility.

MCF – 1,000 cubic feet or 10 CCFs. This is a measure of gas usage.

Meter – A device for measuring levels and volumes of a customer's natural gas usage. The local utility retains responsibility for reading and maintaining these meters.

MMBTU – Million British thermal units, which is a heating equivalent measure for natural gas and is an alternative measure of natural gas reserves.

Service Period – The time period associated with when the Utility reads or estimates the customer's natural gas usage for billing purposes. The customer's service period is established by the Utility.

Therm – One hundred thousand (100,000 British thermal units (1 Therm=100,000 BTU).

0759-01-00-0000385-0001-0000918

Invoice #:	HS65542111
Statement Group #:	[redacted]

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AUG 05 2026

Contract Volumes:	
June	127 MMBTU
July	110 MMBTU
Basis:	$1.351
Billing Unit:	MMBTU

10-2620-621-000-00-100-000-0240

[redacted]

Service Period: 06/13/2026-07/15/2026
Utility Name: UGI
Pool/Point: UGI-NT DCQ POOL
[redacted]
PO #:
Address: 1000 Union Street, LEHIGHTON, PA 18235

Description	Deal ID	Date From - To	Volume	Unit Price	Total
Commodity	2997669	06/13/2026 -06/30/2026	2.97	$5.546	$16.47
Commodity	2997669	07/01/2026 -07/15/2026	2.48	$5.217	$12.94
Change in Law - 11/01/2025	2997669	06/13/2026 -07/15/2026	5.45	($0.3021)	($1.65)
Change in Law - 04/01/2025	2997669	06/13/2026 -07/15/2026	5.45	$0.3174	$1.73
Total :			**5.45**		**$29.49**

Billed volumes are inclusive of a utility line loss factor of 0.98500 for June,0.98500 for July

10-2620-621-000-10-200-000-0240

[redacted]

Service Period: 06/13/2026-07/15/2026
Utility Name: UGI
Pool/Point: UGI-NT DCQ POOL
[redacted]
PO #:
Address: 3 Indian Lane, LEHIGHTON, PA 18235

Description	Deal ID	Date From - To	Volume	Unit Price	Total
Commodity	2997669	06/13/2026 -06/30/2026	85.63	$5.546	$474.90
Commodity	2997669	07/01/2026 -07/15/2026	71.36	$5.217	$372.29
Change in Law - 11/01/2025	2997669	06/13/2026 -07/15/2026	156.99	($0.3021)	($47.43)
Change in Law - 04/01/2025	2997669	06/13/2026 -07/15/2026	156.99	$0.3174	$49.83
Total :			**156.99**		**$849.59**

Billed volumes are inclusive of a utility line loss factor of 0.98500 for June,0.98500 for July

$849.59

PAID
AUG 05 2026

Grand Total	**$879.08**

Memo : Trigger History

Description	Transaction Date	Volume	Unit Price	Total
[redacted]				
Buy At Market: June 2026	07/01/2025	127	$4.1950	$532.77
	Total	**127**	**$4.1950**	**$532.77**
Buy At Market: July 2026	04/21/2026	110	$3.8660	$425.26
	Total	**110**	**$3.8660**	**$425.26**
	Total for Deal	**237**	**$4.0423**	**$958.03**

Vendor: PACASH-Petty Cash
Athletics 1000 Union Street LEHIGHTON PA 18235

Pymt # 0010029799
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
START-UP	07/15/2026		500.00	10-0103-000-000-00-000-000-000-0000	MS FOOTBALL
START-UP	07/15/2026		500.00	10-0103-000-000-00-000-000-000-0000	VOLLEYBALL
START-UP	07/15/2026		500.00	10-0103-000-000-00-000-000-000-0000	FIELD HOCKEY
START-UP	07/15/2026		500.00	10-0103-000-000-00-000-000-000-0000	BOYS/GIRLS SOCCER
START-UP	07/15/2026		2800.00	10-0103-000-000-00-000-000-000-0000	FOOTBALL
	Payment Amount:		**4800.00**		

Vendor: PACASH-Petty Cash
Athletics 1000 Union Street LEHIGHTON PA 18235

Pymt # 0010029799
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
START-UP	07/15/2026		500.00	10-0103-000-000-00-000-000-000-0000	MS FOOTBALL
START-UP	07/15/2026		500.00	10-0103-000-000-00-000-000-000-0000	VOLLEYBALL
START-UP	07/15/2026		500.00	10-0103-000-000-00-000-000-000-0000	FIELD HOCKEY
START-UP	07/15/2026		500.00	10-0103-000-000-00-000-000-000-0000	BOYS/GIRLS SOCCER
START-UP	07/15/2026		2800.00	10-0103-000-000-00-000-000-000-0000	FOOTBALL
	Payment Amount:		**4800.00**		

0010029799

08/05/2026

**********4,800.00

PAY Four Thousand Eight Hundred and 00/100 Dollars

To the Order of:

Petty Cash
Athletics
1000 Union Street
LEHIGHTON PA 18235

NON-NEGOTIABLE

[redacted]

PA CASH

LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST

DATE: 7/15/26

AMOUNT: 400.00

PAID
AUG 05 2026

REQUEST A CHECK FROM 10 FUND PAYABLE TO:

Lehighton Athletics Petty Cash

REASON: Start-up money for fall Sports

SIGNATURE OF REQUESTOR: Kyle Spatt

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR: CJ Smith 7/22/26

ACCOUNT CODE(S):

DEBIT: 10-003-000-000-000 00-000-000-0000

Vendor: PUBLIC 02-Public School Health Insurance Cooperative
PO Box 5406 LANCASTER PA 17606

Pymt # 0010029800
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
		Payment Amount:	660218.03		
		SEE PAYMENT DETAIL LISTING			

Vendor: PUBLIC 02-Public School Health Insurance Co
PO Box 5406 LANCASTER PA 17606

Pymt # 0010029800
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
		Payment Amount:	660218.03		
		SEE PAYMENT DETAIL LISTING			

0010029800

08/05/2026

**********660,218.03

PAY Six Hundred Sixty Thousand Two Hundred Eighteen and 03/100 Dollars

To the Order of:

Public School Health Insurance Cooperative
PO Box 5406
LANCASTER PA 17606

NON-NEGOTIABLE

[redacted]

Payment Detail Listing

Public School Health Insurance Cooperative (PUBLIC 02)
PO Box 5406
LANCASTER PA 17606

Payment Number: 0010029800
Payment Date: 08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
AUGUST 26	08/04/2026		28101.34	10-0462-271-000-00-000-000-000-0000	HEALTHCARE-AUGUST 26
AUGUST 26	08/04/2026		884.96	10-2140-271-000-20-500-000-000-0000	Psychology Medical MS
AUGUST 26	08/04/2026		1137.81	10-2140-271-000-30-800-000-000-0000	Psychology Medical HS
AUGUST 26	08/04/2026		1137.81	10-1225-271-000-30-800-000-000-0000	SPEECH MEDICAL HIGH SCHOOL
AUGUST 26	08/04/2026		1264.23	10-2240-271-000-00-000-000-000-0000	SELF-INS MED HEALTH
AUGUST 26	08/04/2026		1390.66	10-2620-281-000-00-000-000-000-0000	OPEB RETIREE'S HEALTH
AUGUST 26	08/04/2026		1390.66	10-2250-271-000-10-200-000-000-0000	Librarian Medical Elementary
AUGUST 26	08/04/2026		1390.66	10-2160-271-000-10-200-000-000-0000	Social Worker Services-Medical
AUGUST 26	08/04/2026		1390.66	10-1241-281-000-00-000-000-000-0000	Learning Support OPEB
AUGUST 26	08/04/2026		1390.66	10-1110-281-000-30-800-000-000-0000	Retirees Health Benefits HS
AUGUST 26	08/04/2026		1390.66	10-1110-281-000-20-500-000-000-0000	Retirees Health Benefits MS
AUGUST 26	08/04/2026		1896.35	10-2839-271-000-00-000-000-000-0000	Personnel Health
AUGUST 26	08/04/2026		2528.47	10-2140-271-000-10-200-000-000-0000	Psychology Medical EC
AUGUST 26	08/04/2026		2781.31	10-2269-271-000-00-000-000-012-0000	Special Ed Office Medical
AUGUST 26	08/04/2026		3160.58	10-2611-271-000-00-000-000-000-0000	Maint Medical
AUGUST 26	08/04/2026		3160.58	10-2514-271-000-00-000-000-000-0000	Payroll Medical
AUGUST 26	08/04/2026		3160.58	10-2440-271-000-30-800-000-000-0000	NURSE MEDICAL HIGH SCHOOL
AUGUST 26	08/04/2026		3160.58	10-2440-271-000-20-500-000-000-0000	NURSE MEDICAL MIDDLE SCHOOL
AUGUST 26	08/04/2026		3160.58	10-2250-271-000-30-800-000-000-0000	LIBRARIAN MEDICAL HIGH SCHOOL
AUGUST 26	08/04/2026		3160.58	10-2190-271-000-00-000-000-000-0000	SELF-INS MED HEALTH
AUGUST 26	08/04/2026		3160.58	10-2170-271-000-00-000-000-000-0000	PIMS Coordinator Medical
AUGUST 26	08/04/2026		3160.58	10-2160-271-000-30-800-000-000-0000	Social Work Services Medical
AUGUST 26	08/04/2026		3160.58	10-2160-271-000-20-500-000-000-0000	Social Work Services Medical
AUGUST 26	08/04/2026		3160.58	10-2125-271-000-30-800-000-000-0000	GUIDANCE MEDICAL HIGH SCHOOL
AUGUST 26	08/04/2026		3160.58	10-2125-271-000-20-500-000-000-0000	GUIDANCE MEDICAL MIDDLE SCHOOL
AUGUST 26	08/04/2026		3160.58	10-1211-271-000-30-800-000-000-0000	LIFE SKILL MEDICAL H/S
AUGUST 26	08/04/2026		4551.24	10-2120-271-000-30-800-000-000-0000	GUIDANCE MEDICAL HIGH SCHOOL
AUGUST 26	08/04/2026		4551.24	10-2120-271-000-20-500-000-000-0000	GUIDANCE MEDICAL MIDDLE SCHOOL
AUGUST 26	08/04/2026		4740.88	10-3250-271-000-00-000-000-000-0000	Athletics Medical Ins
AUGUST 26	08/04/2026		5246.57	10-1225-271-000-10-200-000-000-0000	Speech Medical Elementary
AUGUST 26	08/04/2026		6005.11	10-2120-271-000-10-200-000-000-0000	Guidance Medical Elementary
AUGUST 26	08/04/2026		6321.17	10-2620-271-000-00-000-000-000-0000	Maintenance Group Benefits
AUGUST 26	08/04/2026		6321.17	10-2440-271-000-10-200-000-000-0000	NURSE MEDICAL Elemtry
AUGUST 26	08/04/2026		6321.17	10-2360-271-000-00-000-000-000-0000	SUPER/ASST MEDICAL
AUGUST 26	08/04/2026		6321.17	10-2250-271-000-20-500-000-000-0000	LIBRARIAN MEDICAL M/S
AUGUST 26	08/04/2026		6321.17	10-1801-271-217-10-200-000-000-0000	Pre-K Medical - Elementary
AUGUST 26	08/04/2026		6321.17	10-1190-271-411-10-200-000-000-0000	Title I Medical - Elementary
AUGUST 26	08/04/2026		6953.28	10-2818-271-000-00-000-000-000-0000	TECHNOLOGY MEDICAL
AUGUST 26	08/04/2026		7648.61	10-2513-271-000-00-000-000-000-0000	Business Medical
AUGUST 26	08/04/2026		7648.61	10-2260-271-000-00-000-000-000-0000	CURR/GRANT MEDICAL
AUGUST 26	08/04/2026		7775.04	10-2380-271-000-20-500-000-000-0000	PRINCIPAL MEDICAL M/SCHOOL
AUGUST 26	08/04/2026		7775.04	10-1231-271-000-30-800-000-000-0000	EMOTIOANL SUPPORT MEDICAL H/S
AUGUST 26	08/04/2026		9165.69	10-2620-271-000-30-800-000-000-0000	Oper Bld Srvs Medical HS
AUGUST 26	08/04/2026		9544.96	10-1231-271-000-20-500-000-000-0000	EMOTIOANL SUPPORT MEDICAL M/S
AUGUST 26	08/04/2026		9544.96	10-1211-271-000-20-500-000-000-0000	LIFE SKILLS MEDICAL M/S
AUGUST 26	08/04/2026		10556.35	10-2620-271-000-20-500-000-000-0000	Oper Bld Srvs Medical MS
AUGUST 26	08/04/2026		10935.62	10-2380-271-000-10-200-000-000-0000	Principal Medical Elementary
AUGUST 26	08/04/2026		10935.62	10-0132-000-000-00-000-000-000-0000	DUE FROM FOOD SERVICE
AUGUST 26	08/04/2026		11125.25	10-2380-271-000-30-800-000-000-0000	PRINCIPAL MEDICAL H/SCHOOL
AUGUST 26	08/04/2026		12326.28	10-2620-271-000-10-200-000-000-0000	Maint. Medical Elementary
AUGUST 26	08/04/2026		12326.28	10-1211-271-000-10-200-000-000-0000	Life Skills Medical Elementary
AUGUST 26	08/04/2026		13716.93	10-1231-271-000-10-200-000-000-0000	Emotion Supp Medical Elementry
AUGUST 26	08/04/2026		15486.86	10-1241-271-000-20-500-000-000-0000	LEARNING SUPPORT MEDICAL M/S
AUGUST 26	08/04/2026		23641.16	10-1241-271-000-30-800-000-000-0000	LEARNING SUPPORT MEDICAL H/S
AUGUST 26	08/04/2026		23641.16	10-1241-271-000-10-200-000-000-0000	Learning Supp. Medical Element
AUGUST 26	08/04/2026		76865.39	10-1110-271-000-20-500-000-000-0000	Teacher Medical Ins MS
AUGUST 26	08/04/2026		83881.88	10-1110-271-000-30-800-000-000-0000	Instruction Medical HS
AUGUST 26	08/04/2026		139697.80	10-1110-271-000-10-200-000-000-0000	Instruction Medical Elementary
	Payment Amount:		**660218.03**		

Public School Health Insurance Cooperative 2026-27

Lehighton Area School District

Month: Aug

Plan Name: HDHP

PAID
AUG 05 2026

Highmark ASO Fee					
		130 x	$51.00 =	$6,630.00
Specific Premium					
	Single	29 x	$119.31 =	$3,459.99
	Multi-Party	101 x	$295.05 =	$29,800.05
Spec Share Fund					
	Single	29 x	$195.19 =	$5,660.51
	Multi-Party	101 x	$468.47 =	$47,315.47
Aggregate Premium					
		130 x	$8.00 =	$1,040.00
Claims Fund					
90% of Max	Single	29 x	$999.21 =	$28,977.09
90% of Max	Multi-Party	101 x	$2,398.10 =	$242,208.10
Benecon Administrative Fee					
		130 x	$25.72 =	$3,343.60
Broker Fee					
		130 x	$46.57 =	$6,054.10
Healthiest You					
		130 x	$10.25 =	$1,332.50
Innovu Fee					
		130 x	$4.55 =	$591.50
Fedlogic Fee					
		130 x	$3.50 =	$455.00
Apex Fee					
		130 x	$4.50 =	$585.00
			Sub- Total:	**$377,452.91**

Public School Health Insurance Cooperative 2026-27

Lehighton Area School District

Month: Aug

Plan Name: PPO $0

Highmark ASO Fee					
		102	x	$51.00 =	$5,202.00
Specific Premium					
	Single	30	x	$119.31 =	$3,579.30
	Multi-Party	72	x	$295.05 =	$21,243.60
Spec Share Fund					
	Single	30	x	$195.19 =	$5,855.70
	Multi-Party	72	x	$468.47 =	$33,729.84
Aggregate Premium					
		102	x	$8.00 =	$816.00
Claims Fund					
90% of Max	Single	30	x	$999.21 =	$29,976.30
90% of Max	Multi-Party	72	x	$2,398.10 =	$172,663.20
Benecon Administrative Fee					
		102	x	$25.72 =	$2,623.44
Broker Fee					
		102	x	$46.57 =	$4,750.14
Healthiest You					
		102	x	$10.25 =	$1,045.50
Innovu Fee					
		102	x	$4.55 =	$464.10
Fedlogic Fee					
		102	x	$3.50 =	$357.00
Apex Fee					
		102	x	$4.50 =	$459.00
				Sub- Total:	**$282,765.12**

PAID
AUG 05 2026

Public School Health Insurance Cooperative 2026-27

Lehighton Area School District

Month: Aug

Totals

		Member Count	Funding
Highmark ASO Fee		232	$11,832.00
Specific Premium			
	Single	59	$7,039.29
	Multi-Party	173	$51,043.65
Spec Share Fund			
	Single	59	$11,516.21
	Multi-Party	173	$81,045.31
Aggregate Premium		232	$1,856.00
Claims Fund			
90% of Max	Single	59	$58,953.39
90% of Max	Multi-Party	173	$414,871.30
Benecon Administrative Fee		232	$5,967.04
Broker Fee		232	$10,804.24
Healthiest You		232	$2,378.00
Innovu Fee		232	$1,055.60
Fedlogic Fee		232	$812.00
Apex Fee		232	$1,044.00
	Total Due:		**$660,218.03**

PAID
AUG 05 2026

CJ 8/4/26

Vendor: Sweet-Sweet Stevens Katz & Williams LLP
331 East Butler Ave NEW BRITAIN PA 18901

Pymt # 0010029801
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
205300	07/16/2026		572.00	10-2350-331-000-00-000-000-012-0000	LEGAL BILL
205893	07/16/2026		833.00	10-2350-331-000-00-000-000-012-0000	LEGAL BILL
	Payment Amount:		**1405.00**		*** Accrued A/P**

Vendor: Sweet-Sweet Stevens Katz & Williams LLP
331 East Butler Ave NEW BRITAIN PA 18901

Pymt # 0010029801
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
205300	07/16/2026		572.00	10-2350-331-000-00-000-000-012-0000	LEGAL BILL
205893	07/16/2026		833.00	10-2350-331-000-00-000-000-012-0000	LEGAL BILL
	Payment Amount:		**1405.00**		*** Accrued A/P**

0010029801

08/05/2026

******************1,405.00**

PAY One Thousand Four Hundred Five and 00/100 Dollars

To the Order of:

Sweet Stevens Katz & Williams LLP
331 East Butler Ave
NEW BRITAIN PA 18901

NON-NEGOTIABLE

[redacted]

SWEET, STEVENS, KATZ & WILLIAMS LLP

331 East Butler Avenue
New Britain, PA 18901
(215) 345-9111

[redacted]

Invoice Number: 205893
Date: 07-16-2026

Lehighton Area School District
1000 Union Street
Lehighton, PA 18235-1198

PAID
AUG 05 2026

Approved 7/30/26

[redacted]

Professional Services Rendered

Date		Description		Hours	Rate	Amount
06-01-26	CAB	Draft e-mail to S. Michalik regarding recommendations for settlement	A103 / L120	0.10	170.00	$17.00
06-01-26	CAB	Analyze e-mail from S. Michalik regarding approval of recommendations for settlement	A104 / L120	0.10	170.00	$17.00
06-04-26	CAB	Telephone conference with opposing counsel regarding Settlement Agreement language involving BHA and outside services	A107 / L160	0.10	170.00	$17.00
06-04-26	CAB	Analyze e-mail from opposing counsel regarding alleged issue with case	A104 / L110	0.10	170.00	$17.00
06-04-26	CAB	Analyze e-mail from S. Michalik regarding BHA and BHT	A104 / L120	0.10	170.00	$17.00
06-04-26	CAB	Draft e-mail to S. Michalik regarding BHA and BHT	A103 / L120	0.10	170.00	$17.00
06-05-26	CAB	Telephone conference with opposing counsel regarding BHA update	A107 / L110	0.10	170.00	$17.00
06-05-26	CAB	Analyze e-mail from S. Michalik regarding BHA language in Settlement Agreement and inquiry	A104 / L120	0.10	170.00	$17.00
06-08-26	CAB	Draft e-mail to opposing counsel regarding BHA decision	A103 / L110	0.10	170.00	$17.00

PAID

AUG 05 2026

06-08-26	CAB	Analyze e-mail from opposing counsel regarding BHA decision	A104 / L110	0.10	170.00	$17.00
06-08-26	CAB	Analyze e-mail from D. Atkins at CM Regent regarding request for update	A104 / L110	0.10	170.00	$17.00
06-09-26	CAB	Draft Settlement Agreement	A103 / L160	0.90	170.00	$153.00
06-09-26	CAB	Analyze e-mail from Hearing Officer regarding case closure set for 6/13	A104 / L110	0.10	170.00	$17.00
06-09-26	CAB	Draft e-mail to D. Atkins at CM Regent regarding status of case and Settlement Agreement drafted	A103 / L150	0.10	170.00	$17.00
06-09-26	CAB	Draft e-mail to opposing counsel regarding draft Settlement Agreement	A103 / L110	0.10	170.00	$17.00
06-12-26	CAB	Analyze e-mail from Hearing Officer regarding decision due date and dismissal	A104 / L110	0.10	170.00	$17.00
06-12-26	CAB	Analyze e-mail from opposing counsel regarding request for 60-day dismissal	A104 / L110	0.10	170.00	$17.00
06-12-26	CAB	Analyze e-mail from Hearing Officer regarding request for 60-day dismissal granted	A104 / L110	0.10	170.00	$17.00
06-12-26	CAB	Draft e-mail to S. Michalik regarding BHA language and Settlement Agreement terms	A103 / L120	0.10	170.00	$17.00
06-12-26	CAB	Analyze e-mail from S. Michalik regarding agreement to BHA language and Settlement Agreement terms	A104 / L120	0.10	170.00	$17.00
06-12-26	CAB	Analyze e-mail from S. Michalik to Parent regarding BHA decision	A104 / L120	0.10	170.00	$17.00
06-12-26	CAB	Draft e-mail to S. Michalik regarding explanation of BHA language and Settlement Agreement terms	A103 / L120	0.10	170.00	$17.00
06-12-26	CAB	Analyze e-mail from S. Michalik regarding acceptance of BHA language and Settlement Agreement terms	A104 / L120	0.10	170.00	$17.00
06-13-26	CAB	Analyze e-mail from opposing counsel regarding Settlement Agreement revisions requested	A104 / L110	0.10	170.00	$17.00
06-15-26	CAB	Draft e-mail to D. Atkins at CM Regent regarding status	A103 / L150	0.10	170.00	$17.00

06-16-26	CAB	Analyze e-mail from opposing counsel regarding request for revisions	A104 / L110	0.10	170.00	$17.00
06-17-26	CAB	Revise Settlement Agreement based on Parent requested revisions	A103 / L160	0.30	170.00	$51.00
06-17-26	CAB	Analyze e-mail from opposing counsel regarding additional revision requested	A104 / L110	0.10	170.00	$17.00
06-17-26	CAB	Analyze e-mail from opposing counsel regarding revision requested and use of AI by opposing counsel	A104 / L110	0.10	170.00	$17.00
06-17-26	CAB	Analyze e-mail from opposing counsel regarding Parent executed Settlement Agreement	A104 / L110	0.10	170.00	$17.00
06-17-26	CAB	Draft e-mail to opposing counsel regarding no objection to additional revision requested	A103 / L110	0.10	170.00	$17.00
06-17-26	CAB	Analyze and respond to e-mail from opposing counsel regarding request for revisions and proposed timeline	A104 / L110	0.20	170.00	$34.00
06-19-26	CAB	Analyze and respond to e-mail from S. Michalik regarding Settlement Agreement and signature inquiry	A104 / L120	0.20	170.00	$34.00
06-19-26	CAB	Analyze e-mail from S. Michalik regarding Settlement Agreement and imminent approval	A104 / L120	0.10	170.00	$17.00
06-26-26	CAB	Analyze e-mail from S. Michalik regarding Board agenda and Settlement Agreement issue	A104 / L120	0.10	170.00	$17.00
06-26-26	CAB	Analyze and respond to e-mail from D. Atkins at CM Regent regarding status update	A104 / L150	0.20	170.00	$34.00

Professional Services Rendered Subtotal: $833.00

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AUG 05 2026

Total $833.00

Timekeeper Summary

Name	Initials	Hours	Rate	Total
Christopher Bambach	CAB	4.90	170.00	$833.00

SWEET, STEVENS, KATZ & WILLIAMS LLP

331 East Butler Avenue
New Britain, PA 18901
(215) 345-9111

[redacted]

Invoice Number: 205300
Date: 07-16-2026

Lehighton Area School District
1000 Union Street
Lehighton, PA 18235-1198

25.2454

PAID
AUG 05 2026

Approved
7/30/26

[redacted]

Professional Services Rendered

Date		Description	Hours	Rate	Amount
06-04-26	CAB	Analyze e-mail from opposing counsel regarding terms proposed for Settlement Agreement revision	0.20	220.00	$44.00
06-08-26	CAB	Analyze and respond to multiple emails from opposing counsel regarding compensatory education requests by Parent	0.40	220.00	$88.00
06-08-26	CAB	Analyze e-mail from S. Michalik regarding Parent requested BHA language	0.10	220.00	$22.00
06-08-26	CAB	Draft e-mail to S. Michalik regarding Parent requested BHA language	0.10	220.00	$22.00
06-08-26	CAB	Analyze e-mail from S. Michalik regarding agreement to exclude BHA language	0.10	220.00	$22.00
06-08-26	CAB	Analyze and respond to multiple e-mails from S. Michalik regarding compensation education requests by Parent	0.60	220.00	$132.00
06-09-26	CAB	Revise Settlement Agreement with agreed upon language (final)	0.20	220.00	$44.00
06-09-26	CAB	Analyze and respond to multiple emails from S. Michalik regarding revised Settlement Agreement language	0.40	220.00	$88.00
06-09-26	CAB	Draft e-mail to opposing counsel regarding revised Settlement Agreement	0.20	220.00	$44.00
06-30-26	CAB	Analyze Parent executed Settlement Agreement	0.10	220.00	$22.00

06-30-26	CAB Analyze attorney fee invoice	0.10	220.00	$22.00
06-30-26	CAB Analyze W-9	0.10	220.00	$22.00

Professional Services Rendered Subtotal: $572.00

Total $572.00

Timekeeper Summary

Name	Initials	Hours	Rate	Total
Christopher Bambach	CAB	2.60	220.00	$572.00

The preceding contains records of attorney-client transactions and the information may be subject to attorney-client privilege. It should not be released or disclosed to anyone without first contacting counsel.

TO ENSURE PROPER CREDIT TO THIS ACCOUNT, PLEASE REFERENCE THE ABOVE FILE NUMBER AND/OR INVOICE NUMBER ON YOUR CHECK.

PAID
AUG 05 2026

Vendor: TOSHIBAMB-Toshiba America Business Solutions
PO Box 418600 BOSTON MA 02241-8600

Pymt # 0010029802
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
6367191	07/21/2026		97.35	10-1110-442-000-30-800-000-080-0000	COPIES-HS
6367191	07/21/2026		87.20	10-1110-442-000-20-500-000-050-0000	COPIES-MS
6367191	07/21/2026		224.37	10-1110-442-000-10-200-000-020-0000	COPIES-EC
6367191	07/21/2026		54.66	10-2513-442-000-00-000-000-025-0000	COPIES-ADMIN
	Payment Amount:		**463.58**		*** Accrued A/P**

Vendor: TOSHIBAMB-Toshiba America Business Solution
PO Box 418600 BOSTON MA 02241-8600

Pymt # 0010029802
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
6367191	07/21/2026		97.35	10-1110-442-000-30-800-000-080-0000	COPIES-HS
6367191	07/21/2026		87.20	10-1110-442-000-20-500-000-050-0000	COPIES-MS
6367191	07/21/2026		224.37	10-1110-442-000-10-200-000-020-0000	COPIES-EC
6367191	07/21/2026		54.66	10-2513-442-000-00-000-000-025-0000	COPIES-ADMIN
	Payment Amount:		**463.58**		*** Accrued A/P**

0010029802

08/05/2026

********************463.58**

PAY Four Hundred Sixty-Three and 58/100 Dollars

To the Order of:

Toshiba America Business Solutions
PO Box 418600
BOSTON MA 02241-8600

NON-NEGOTIABLE

[redacted]

TOSHIBA

TOSHIBA AMERICA BUSINESS SOLUTIONS
P.O. BOX 418600
BOSTON, MA 02241-8600

MAINTENANCE INVOICE

EPA1

Invoice Number: 6367191
Page: 1 of 3
Invoice Date: 21-JUL-26

SHIP TO: LEHIGHTON AREA SCHOOL DISTRICT
1000 UNION ST
LEHIGHTON, PA 18235-1700

[redacted]

TOTAL DUE $463.58

BILL TO: LEHIGHTON AREA SCHOOL DISTRICT
1000 UNION ST
LEHIGHTON, PA 18235-1700

PAID
AUG 05 2026

REMIT TO: TOSHIBA AMERICA BUSINESS SOLUTIONS
P.O. BOX 418600
BOSTON, MA 02241-8600

PLEASE CUT ALONG LINE AND RETURN WITH REMITTANCE

[redacted] PO NUMBER [redacted] PAYMENT TERMS [redacted]
30 NET

MODEL/SERIAL/LOCATION	METER DESC.	QTY	DESCRIPTION	START METER	END METER	AMOUNT
ESTUDIO6518A / SC2AM37342 EA32566 ADMIN OFFICE	BW		Device Meter Usage: 0	1559948	1559948	
ESTUDIO6518A / SC2CM38052 EA32568-GUIDANCE	BW		Device Meter Usage: 4033	2550213	2554246	
ESTUDIO6518A / SC2CM38035 EA32570	BW		Device Meter Usage: 495	1099822	1100317	
ESTUDIO8518A / SC2EM39100 EA32985 3 INDIAN LN	BW		Device Meter Usage: 3117	834372	837489	
ESTUDIO6518A / SC2CM38033 EA32565	BW		Device Meter Usage: 875	1694427	1695302	
ESTUDIO6518A / SC2CM38032 EA32569	BW		Device Meter Usage: 152	740314	740466	
ESTUDIO4515AC / SCNEM37817 EA32973 1000 UNION ST	BW		Device Meter Usage: 3362	143458	146820	

EJ 7/30/2026

TOTAL SALES	TAX AMOUNT	FREIGHT AMOUNT	TOTAL DUE
$463.58	$0.00	$0.00	$463.58

TOSHIBA

TOSHIBA AMERICA BUSINESS SOLUTIONS
P.O. BOX 418600
BOSTON, MA 02241-8600

MAINTENANCE INVOICE

EPA1

Invoice Number: 6367191
Page: 2 of 3
Invoice Date: 21-JUL-26

SHIP TO: LEHIGHTON AREA SCHOOL DISTRICT
1000 UNION ST
LEHIGHTON, PA 18235-1700

[redacted]

TOTAL DUE $463.58

BILL TO: LEHIGHTON AREA SCHOOL DISTRICT
1000 UNION ST
LEHIGHTON, PA 18235-1700

REMIT TO: TOSHIBA AMERICA BUSINESS SOLUTIONS
P.O. BOX 418600
BOSTON, MA 02241-8600

[redacted] ---------- PLEASE CUT ALONG LINE AND RETURN WITH REMITTANCE ----------

PO NUMBER	[redacted]	PAYMENT TERMS	[redacted]
		30 NET	

MODEL/SERIAL/LOCATION	METER DESC.	QTY	DESCRIPTION	START METER	END METER	AMOUNT
ESTUDIO4515AC / SCNEM37819 EA32921 1 INDIAN LN	BW		Device Meter Usage: 789	129774	130563	
ESTUDIO6518A / SC2CM38037 EA32567 BACK OF OFFICE	BW		Device Meter Usage: 7367	480572	487939	
ESTUDIO8518A / SC2EM39270 EA32982 301 BEAVER RUN RD	BW		Device Meter Usage: 3021	614707	617728	
ESTUDIO6518A / SC2CM38011 EA32571	BW		Device Meter Usage: 805	1274136	1274941	
ESTUDIO6518A / SC2JL35520 EA32483 ADMIN OFFICE	BW		Device Meter Usage: 2	1425748	1425750	
ESTUDIO4518A / SCZBM60185 EA32484	BW		Device Meter Usage: 38	980218	980256	
ESTUDIO4515AC / SCNEM37827 EA32972 3 INDIAN LN	BW		Device Meter Usage: 3042	383304	386346	
		27098	CPC BILLING - 06/15/2026 - 07/14/2026			$161.14
ESTUDIO4515AC / SCNEM37819 EA32921 1 INDIAN LN	CLR		Device Meter Usage: 603	48570	49173	
ESTUDIO4515AC / SCNEM37827 EA32972 3 INDIAN LN	CLR		Device Meter Usage: 2040	108219	110259	
ESTUDIO4515AC / SCNEM37817 EA32973 1000 UNION ST	CLR		Device Meter Usage: 2597	120348	122945	

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AUG 05 2026

TOSHIBA

TOSHIBA AMERICA BUSINESS SOLUTIONS
P.O. BOX 418600
BOSTON, MA 02241-8600

MAINTENANCE INVOICE

EPA1

Invoice Number: 6367191
Page: 3 of 3
Invoice Date: 21-JUL-26

SHIP TO: LEHIGHTON AREA SCHOOL DISTRICT
1000 UNION ST
LEHIGHTON, PA 18235-1700

[redacted]

TOTAL DUE $463.58

BILL TO: LEHIGHTON AREA SCHOOL DISTRICT
1000 UNION ST
LEHIGHTON, PA 18235-1700

REMIT TO: **TOSHIBA AMERICA BUSINESS SOLUTIONS**
P.O. BOX 418600
BOSTON, MA 02241-8600

[redacted] ---------- PLEASE CUT ALONG [redacted] REMITTANCE ---------- [redacted]

	PO NUMBER		PAYMENT TERMS
			30 NET

MODEL/SERIAL/LOCATION	METER DESC.	QTY	DESCRIPTION	START METER	END METER	AMOUNT
		5240	CPC BILLING - 06/15/2026 - 07/14/2026			$302.44

^ MONTHLY USAGE MAINTENANCE ^

PAID
AUG 05 2026

Vendor: Toshiba-P-Toshiba America Business Solutions
PO Box 070241 PHILADELPHIA PA 19176-0241

Pymt # 0010029803
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
5039555393	07/23/2026		414.87	10-1110-442-000-30-800-000-080-0000	COPIERS-HS
5039555393	07/23/2026		371.22	10-1110-442-000-20-500-000-050-0000	COPIERS-MS
5039555393	07/23/2026		955.70	10-1110-442-000-10-200-000-020-0000	COPIERS-EC
5039555393	07/23/2026		232.80	10-2513-442-000-00-000-000-025-0000	COPIERS-ADMIN
	Payment Amount:		**1974.59**		

Vendor: Toshiba-P-Toshiba America Business Solution
PO Box 070241 PHILADELPHIA PA 19176-0241

Pymt # 0010029803
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
5039555393	07/23/2026		414.87	10-1110-442-000-30-800-000-080-0000	COPIERS-HS
5039555393	07/23/2026		371.22	10-1110-442-000-20-500-000-050-0000	COPIERS-MS
5039555393	07/23/2026		955.70	10-1110-442-000-10-200-000-020-0000	COPIERS-EC
5039555393	07/23/2026		232.80	10-2513-442-000-00-000-000-025-0000	COPIERS-ADMIN
	Payment Amount:		**1974.59**		

0010029803

08/05/2026

******************1,974.59**

PAY One Thousand Nine Hundred Seventy-Four and 59/100 Dollars

To the Order of:

Toshiba America Business Solutions
PO Box 070241
PHILADELPHIA PA 19176-0241

NON-NEGOTIABLE

[redacted]

Customer Care

Hours of Operation
M-F, 7am - 6pm CT

Telephone
877-222-5617

Payments
Toshiba America Business Solutions Inc
PO Box 70241
Philadelphia, PA 19176-0241

Email
customerservice@financialservicing.net

Online Services
https://onlinemyaccounts.com

Invoice Summary

Contract Number	[redacted]
Customer Number	
Invoice Number	5039555393
Due Date	09/07/2026
Invoice Date	07/23/2026
Total Due	$1,974.59

Accounts Payable
Lehighton Area School District
1000 Union Street
Lehighton, PA 18235

Last Payment $1,974.59
posted on 07/13/2026

Important Messages

This invoice represents current charges only and does not include previously invoiced and unpaid charges.

Your contract/s are on email billing. Please contact Customer Care at the number listed on this invoice to update or add additional email addresses.

Make the Switch to recurring ACH Payments — It's Fast, Secure, Effortless, and FREE! Why risk possible delays with mailing a check? Electronic payments save you time, reduce errors, and offer peace of mind with secure processing. Plus, you'll help reduce environmental waste and streamline your financial management. **You can head to the online section of your invoice above to get everything set up. Join the smarter way to pay — go electronic today.**

Contract Number	Asset Description	Model/Serial Number	Asset Location
450-0047827-000 **Coverage Period** 08/07/2026-09/06/2026	Toshiba Copier	e-STUDIO4515AC SCNEM37817	1000 Union Street Lehighton, PA 18235
	Toshiba Copier	e-STUDIO6518A SC2CM38052	1 Indian Lane Lehighton, PA 18235
	Toshiba Copier	e-STUDIO6518A SC2CM38033	3 Indian Lane Lehighton, PA 18235
	Toshiba Copier	e-STUDIO6518A SC2JL35520	3 Indian Lane Lehighton, PA 18235
	Toshiba Copier	e-STUDIO6518A SC2AM37342	3 Indian Lane Lehighton, PA 18235
	Toshiba Copier	e-STUDIO6518A SC2CM38032	301 Beaver Run Road Lehighton, PA 18235

Continued on the next page

7/30/26

Detach and return the bottom remittance portion with your payment. Include invoice number on check.

[redacted]

Customer Care
PO Box 659713
San Antonio, TX 78265-9713

Due Date	09/07/2026
Invoice Date	07/23/2026
Total Due	$1,974.59

PAID
AUG 05 2026

Amount Enclosed $ 1974.59

Accounts Payable
Lehighton Area School District
1000 Union Street
Lehighton, PA 18235

Please make check payable to:

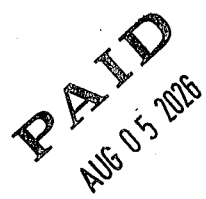
Toshiba America Business Solutions Inc
PO Box 70241
Philadelphia, PA 19176-0241

[redacted]

Invoice Number: 5039555393
Customer Number: 1000328264

Contract Number	Asset Description	Model/Serial Number	Asset Location
	Toshiba Copier	e-STUDIO6518A SC2CM38035	301 Beaver Run Road Lehighton, PA 18235
	Toshiba Copier	e-STUDIO8518A SC2EM39100	3 Indian Lane Lehighton, PA 18235
	Toshiba Copier	e-STUDIO8518A SC2EM39270	301 Beaver Run Road Lehighton, PA 18235
	Toshiba Copier	e-STUDIO4515AC SCNEM37819	1 Indian Lane Lehighton, PA 18235
	Toshiba Copier	e-STUDIO4518A SCZBM60185	1 Indian Lane Lehighton, PA 18235
	Toshiba Copier	e-STUDIO6518A SC2CM38011	3 Indian Lane Lehighton, PA 18235
	Toshiba Copier	e-STUDIO6518A SC2CM38037	1000 Union Street Lehighton, PA 18235
	Toshiba Copier	e-STUDIO4515AC SCNEM37827	3 Indian Lane Lehighton, PA 18235

Item Description	Amount	Tax	Item Total	Due Date	Subtotal
Payment Amount	1,974.59		1,974.59	09/07/2026	$1,974.59
			450-0047827-000 Total Charges:		$1,974.59
				Invoice Total:	$1,974.59



Vendor: TRUSTM-Trustmark Voluntary Benefits Solutions
75 Remittance Dr. Ste 1791 CHICAGO IL 60675

Pymt # 0010029804
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
9279-JUL	08/04/2026		2573.14	10-0462-214-000-00-000-000-000-0000	LEHIGHTON AREA SD #9279 JULY 2
		Payment Amount:	**2573.14**		

Vendor: TRUSTM-Trustmark Voluntary Benefits Solutio
75 Remittance Dr. Ste 1791 CHICAGO IL 60675

Pymt # 0010029804
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
9279-JUL	08/04/2026		2573.14	10-0462-214-000-00-000-000-000-0000	LEHIGHTON AREA SD #9279 JULY 2
		Payment Amount:	**2573.14**		

0010029804

08/05/2026

******************2,573.14**

PAY Two Thousand Five Hundred Seventy-Three and 14/100 Dollars

To the Order of:

Trustmark Voluntary Benefits Solutions
75 Remittance Dr. Ste 1791
CHICAGO IL 60675

NON-NEGOTIABLE

[redacted]

7/5

Coverage	Age Range	Class	Coverage Tier	Coverages	Volume	Premium (Monthly)
Trustmark Universal Life Events	22-22	Support	Employee Only	1	50,000.00	23.66
Trustmark Universal Life Events	45-45	Support	Employee Only	1	50,000.00	57.29
Trustmark Universal Life Events	46-46	Support	Employee Only	2	100,000.00	120.26
Trustmark Universal Life Events	55-55	Support	Employee Only	1	50,000.00	99.28
Trustmark Universal Life Events	23-23	Act 93/Business Adminis	Employee Only	1	25,000.00	13.80
Trustmark Universal Life Events	25-25	Act 93/Business Adminis	Employee Only	1	25,000.00	14.21
Trustmark Universal Life Events	26-26	Act 93/Business Adminis	Employee Only	1	50,000.00	25.35
Trustmark Universal Life Events	28-28	Act 93/Business Adminis	Employee Only	1	50,000.00	26.67
Trustmark Universal Life Events	29-29	Act 93/Business Adminis	Employee Only	1	25,000.00	15.41
Trustmark Universal Life Events	33-33	Act 93/Business Adminis	Employee Only	1	25,000.00	17.68
Trustmark Universal Life Events	34-34	Act 93/Business Adminis	Employee Only	1	50,000.00	32.98
Trustmark Universal Life Events	36-36	Act 93/Business Adminis	Employee Only	2	175,000.00	121.29
Trustmark Universal Life Events	38-38	Act 93/Business Adminis	Employee Only	1	50,000.00	39.74
Trustmark Universal Life Events	40-40	Act 93/Business Adminis	Employee Only	2	125,000.00	107.32
Trustmark Universal Life Events	41-41	Act 93/Business Adminis	Employee Only	1	50,000.00	45.96
Trustmark Universal Life Events	42-42	Act 93/Business Adminis	Employee Only	2	100,000.00	97.42
Trustmark Universal Life Events	44-44	Act 93/Business Adminis	Employee Only	1	50,000.00	53.97
Trustmark Universal Life Events	45-45	Act 93/Business Adminis	Employee Only	1	50,000.00	57.29
Trustmark Universal Life Events	48-48	Act 93/Business Adminis	Employee Only	1	75,000.00	97.26
Trustmark Universal Life Events	49-49	Act 93/Business Adminis	Employee Only	2	100,000.00	138.84
Trustmark Universal Life Events	50-50	Act 93/Business Adminis	Employee Only	3	100,000.00	148.87
Trustmark Universal Life Events	51-51	Act 93/Business Adminis	Employee Only	3	125,000.00	194.95
Trustmark Universal Life Events	52-52	Act 93/Business Adminis	Employee Only	1	50,000.00	82.14
Trustmark Universal Life Events	54-54	Act 93/Business Adminis	Employee Only	1	50,000.00	92.99
Trustmark Universal Life Events	56-56	Act 93/Business Adminis	Employee Only	1	50,000.00	106.15
Trustmark Universal Life Events	57-57	Act 93/Business Adminis	Employee Only	1	50,000.00	113.36
Trustmark Universal Life Events	61-61	Act 93/Business Adminis	Employee Only	1	50,000.00	144.56
Trustmark Universal Life Events	28-28	Act 93/Business Adminis	Spouse Only	1	25,000.00	15.08
Trustmark Universal Life Events	35-35	Act 93/Business Adminis	Spouse Only	1	25,000.00	18.96
Trustmark Universal Life Events	37-37	Act 93/Business Adminis	Spouse Only	1	25,000.00	20.54
Trustmark Universal Life Events	41-41	Act 93/Business Adminis	Spouse Only	2	50,000.00	49.58
Trustmark Universal Life Events	45-45	Act 93/Business Adminis	Spouse Only	1	25,000.00	30.44
Trustmark Universal Life Events	49-49	Act 93/Business Adminis	Spouse Only	1	25,000.00	36.51
Trustmark Universal Life Events	50-50	Act 93/Business Adminis	Spouse Only	1	25,000.00	38.11
Trustmark Universal Life Events	51-51	Act 93/Business Adminis	Spouse Only	1	25,000.00	40.43
Trustmark Universal Life Events	53-53	Act 93/Business Adminis	Spouse Only	1	25,000.00	45.33
Trustmark Universal Life Events	54-54	Act 93/Business Adminis	Spouse Only	1	25,000.00	48.30
Trustmark Universal Life Events	58-58	Act 93/Business Adminis	Spouse Only	1	25,000.00	61.86
Trustmark Universal Life Events	62-62	Act 93/Business Adminis	Spouse Only	1	25,000.00	79.30
Totals:				**49**	**$2,075,000.00**	**$2,573.14**

PAID

AUG 05 2026

[redacted]

EO
8/4/26

Vendor: US OMNI-US OMNI & TSACG Compliance Service
P O Box 2799 FORT WALTON BEACH FL 32549-2799

Pymt # 0010029805
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
137053	07/16/2026		146.00	10-2513-330-000-00-000-000-025-0000	COMPLIANCE SERVICES-june
	Payment Amount:		**146.00**		*** Accrued A/P**

Vendor: US OMNI-US OMNI & TSACG Compliance Service
P O Box 2799 FORT WALTON BEACH FL 32549-2799

Pymt # 0010029805
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
137053	07/16/2026		146.00	10-2513-330-000-00-000-000-025-0000	COMPLIANCE SERVICES-june
	Payment Amount:		**146.00**		*** Accrued A/P**

0010029805

08/05/2026

********************146.00**

PAY One Hundred Forty-Six and 00/100 Dollars

To the Order of:

US OMNI & TSACG Compliance Service
P O Box 2799
FORT WALTON BEACH FL 32549-2799

NON-NEGOTIABLE

[redacted]

AP

US OMNI & TSACG Compliance Services

Date	Invoice #
7/16/2026	137053

P.O. Box 2799
Fort Walton Beach, FL
32549-2799

For: 403(b) and/or 457(b) Retirement Plan Administration & Compliance Services

BILL TO:		
Lehighton Area School District		
1000 Union Street		
Lehighton	PA	18235

Vendor Number
PO Number

Terms	Due Date
Net 30	8/17/2026

An Asterisk (*), if shown, indicates an adjustment.

Description	Count	Period	Rate	Amount
Lehighton Area School District	73	Jun 2026	$2.00	$146.00
Count TOTAL	73	**BALANCE DUE**		$146.00

Please remit Payment to:	Telephone
US OMNI & TSACG Compliance Services P.O. Box 2799 Fort Walton Beach, FL 32549-2799	1-888-777-5827 **Email** finance@tsacg.com

CJ 7/25/26

10-2513-330-006-60-000-000-025

PAID
AUG 05 2026

For accurate payment processing please include the invoice number on all payments.
Please be advised: The billing information contained in this invoice is derived directly from data received from Plan Sponsor and/or Authorized Investment Provider(s). These amounts are only for those Plan Sponsors that have executed the applicable Plan Administration Agreement with US Omni & TSACG Compliance Services, and for which the Investment Provider is listed as authorized. Amounts are calculated based on the number of contributing participants in each plan (403(b) or 457(b)) per employer.

13-7

Vendor: VISION BE-Vision Benefits of America
PO Box 74008623 CHICAGO IL 60674-8623

Pymt # 0010029806
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
		Payment Amount:	2080.69		
		SEE PAYMENT DETAIL LISTING			

Vendor: VISION BE-Vision Benefits of America
PO Box 74008623 CHICAGO IL 60674-8623

Pymt # 0010029806
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
		Payment Amount:	2080.69		
		SEE PAYMENT DETAIL LISTING			

0010029806

08/05/2026

**********2,080.69

PAY Two Thousand Eighty and 69/100 Dollars

To the Order of:

Vision Benefits of America
PO Box 74008623
CHICAGO IL 60674-8623

NON-NEGOTIABLE

[redacted]

Payment Detail Listing

Vision Benefits of America (VISION BE)
PO Box 74008623
CHICAGO IL 60674-8623

Payment Number: 0010029806
Payment Date: 08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
1978494	08/03/2026		429.66	10-0462-215-000-00-000-000-000-0000	HEALTHCARE-AUG 26
1978494	08/03/2026		2.48	10-1225-215-000-30-800-000-000-0000	SPEECH VISION HIGH SCHOOL
1978494	08/03/2026		2.81	10-2240-215-000-00-000-000-000-0000	EYE CARE INSURANCE
1978494	08/03/2026		2.81	10-2140-215-000-20-500-000-000-0000	Pysch Vision MS
1978494	08/03/2026		3.47	10-2140-215-000-30-800-000-000-0000	Pysch Vision HS
1978494	08/03/2026		4.29	10-2839-215-000-00-000-000-000-0000	EYE CARE INSURANCE
1978494	08/03/2026		7.10	10-2611-215-000-00-000-000-000-0000	Oper/Main Vision
1978494	08/03/2026		7.10	10-2514-215-000-00-000-000-000-0000	Payroll Vision
1978494	08/03/2026		7.10	10-2440-215-000-30-800-000-000-0000	NURSE VISION HIGH SCHOOL
1978494	08/03/2026		7.10	10-2440-215-000-20-500-000-000-0000	NURSE VISION MIDDLE SCHOOL
1978494	08/03/2026		7.10	10-2250-215-000-30-800-000-000-0000	LIBRARIAN VISION HIGH SCHOOL
1978494	08/03/2026		7.10	10-2250-215-000-10-200-000-000-0000	Librarian Vision EC
1978494	08/03/2026		7.10	10-2190-215-000-00-000-000-000-0000	EYE CARE INSURANCE
1978494	08/03/2026		7.10	10-2170-215-000-00-000-000-000-0000	EYE CARE INSURANCE
1978494	08/03/2026		7.10	10-2160-215-000-30-800-000-000-0000	Social Worker Vision HS
1978494	08/03/2026		7.10	10-2160-215-000-20-500-000-000-0000	Social Worker Vision MS
1978494	08/03/2026		7.10	10-2160-215-000-10-200-000-000-0000	EYE CARE INSURANCE
1978494	08/03/2026		7.10	10-2125-215-000-30-800-000-000-0000	GUIDANCE VISION HIGH SCHOOL
1978494	08/03/2026		7.10	10-2125-215-000-20-500-000-000-0000	GUIDANCE VISION MIDDLE SCHOOL
1978494	08/03/2026		7.10	10-1241-282-000-30-800-000-000-0000	LS OPEB Dental
1978494	08/03/2026		7.10	10-1211-215-000-30-800-000-000-0000	LIFE SKILLS VISION HIGH SCHOOL
1978494	08/03/2026		7.76	10-2140-215-000-10-200-000-000-0000	Pysch Vision EC
1978494	08/03/2026		10.57	10-3250-215-000-00-000-000-000-0000	Athletics Vision
1978494	08/03/2026		11.72	10-1225-215-000-10-200-000-000-0000	Speech Vision EC
1978494	08/03/2026		14.20	10-2620-215-000-00-000-000-000-0000	Oper Bld Srvs Vision
1978494	08/03/2026		14.20	10-2440-215-000-10-200-000-000-0000	NURSE VISION EC
1978494	08/03/2026		14.20	10-2360-215-000-00-000-000-000-0000	SUPERERINTENDENT VISION
1978494	08/03/2026		14.20	10-2269-215-000-00-000-000-012-0000	Special Ed Vision
1978494	08/03/2026		14.20	10-2250-215-000-20-500-000-000-0000	LIBRARIAN VISION MIDDLE SCHOOL
1978494	08/03/2026		14.20	10-2120-215-000-30-800-000-000-0000	GUIDANCE VISION HIGH SCHOOL
1978494	08/03/2026		14.20	10-2120-215-000-20-500-000-000-0000	GUIDANCE VISION MIDDLE SCHOOL
1978494	08/03/2026		14.20	10-1801-215-217-10-200-000-000-0000	Pre K Vision Insurance
1978494	08/03/2026		17.01	10-2513-215-000-00-000-000-000-0000	Business Vision
1978494	08/03/2026		17.01	10-2260-215-000-00-000-000-000-0000	CURR/GRANT VISION
1978494	08/03/2026		21.30	10-2380-215-000-20-500-000-000-0000	PRINCIPAL VISION MIDDLE SCHOOL
1978494	08/03/2026		21.30	10-2120-215-000-10-200-000-000-0000	Guidance Vision EC
1978494	08/03/2026		21.30	10-1231-215-000-30-800-000-000-0000	EMOTIONAL SUPPORT VISION H/S
1978494	08/03/2026		21.30	10-1231-215-000-20-500-000-000-0000	EMOTIONAL SUPPORT VISION M/S
1978494	08/03/2026		21.30	10-1211-215-000-20-500-000-000-0000	LIFE SKILLS VISION M/S
1978494	08/03/2026		21.30	10-0132-000-000-00-000-000-000-0000	DUE FROM FOOD SERVICE
1978494	08/03/2026		22.62	10-2818-215-000-00-000-000-000-0000	TECHNOLOGY VISION
1978494	08/03/2026		24.77	10-2380-215-000-30-800-000-000-0000	PRINCIPAL VISION HIGH SCHOOL
1978494	08/03/2026		28.40	10-2620-215-000-30-800-000-000-0000	Oper/Maint Vision HS
1978494	08/03/2026		28.40	10-2620-215-000-20-500-000-000-0000	Oper Bld Srvs Vision MS
1978494	08/03/2026		28.40	10-2380-215-000-10-200-000-000-0000	Principal Vision EC
1978494	08/03/2026		35.50	10-2620-215-000-10-200-000-000-0000	Oper Bld Servs Vision EC
1978494	08/03/2026		35.50	10-1211-215-000-10-200-000-000-0000	Life Skills Vision EC
1978494	08/03/2026		42.60	10-1241-215-000-20-500-000-000-0000	LEARNING SUPPORT VISION M/S
1978494	08/03/2026		42.60	10-1231-215-000-10-200-000-000-0000	Emotional Support Vision EC
1978494	08/03/2026		49.70	10-1241-215-000-10-200-000-000-0000	Learning Support Vision EC
1978494	08/03/2026		70.83	10-1241-215-000-30-800-000-000-0000	LEARNING SUPPORT VISION H/S
1978494	08/03/2026		198.45	10-1110-215-000-20-500-000-000-0000	Instruction Vision MS
1978494	08/03/2026		233.79	10-1110-215-000-30-800-000-000-0000	Instruction Vision High School
1978494	08/03/2026		381.64	10-1110-215-000-10-200-000-000-0000	Instruction vision elem
	Payment Amount:		**2080.69**		

vba

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FAX: (412) 881-4898
www.vbaplans.com

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AUG 05 2026

PREMIUM COVERAGE MONTH: August 2026
INVOICE #: 1978494

LEHIGHTON AREA SCHOOL DISTRICT
REBECCA KARPOWICZ
1000 UNION STREET
LEHIGHTON, PA 18235

INVOICE DUE DATE: AUG 03, 2026
PREMIUM DUE: $4,197.10
EMPLOYEES: 234

[redacted]EHIGHTON AREA SCHOOL DISTRICT

PREVIOUS BALANCE				$2,116.41
PAYMENTS RECEIVED AS OF JUL 10			($0.00)	
OTHER ADJUSTMENTS			$0.00	
OPEN BALANCE				$2,116.41
Coverage	Qty	Rate	Amt Billed	
Composite	234	$8.93	$2,089.62	
	234		$2,089.62	
RETROACTIVE ADDITIONS/TERMINATIONS			($8.93)	
TOTAL NEW CHARGES			$2,080.69	$2,080.69
AMOUNT DUE				$4,197.10

7/8/26 RD
CK# 10029661

CJ 7/28/26

PAYOR

[redacted]

1000 UNION STREET
LEHIGHTON, PA 18235

PAYMENT COUPON

(detach and return with check / write invoice # on check)

Make checks payable to: VISION BENEFITS OF AMERICA

INVOICE #: 1978494
RETURN PAYMENT TO:

VISION BENEFITS OF AMERICA INC
P.O. BOX 74008623
CHICAGO, IL 60674-8623

INVOICE DUE DATE: AUG 03, 2026
PREMIUM DUE: $4,197.10

PREMIUM PAID: $ 2080.69

Vendor: Wallenpa-Wallenpaupack Girls Wrestling Booster Club
2552 US-6 E HAWLEY PA 18428

Pymt # 0010029807
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
TOURNAMENT	07/30/2026		300.00	10-3250-810-000-30-800-023-000-0000	GIRLS WRESTLING TOURNAMENT 12/
	Payment Amount:		**300.00**		

Vendor: Wallenpa-Wallenpaupack Girls Wrestling Boos
2552 US-6 E HAWLEY PA 18428

Pymt # 0010029807
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
TOURNAMENT	07/30/2026		300.00	10-3250-810-000-30-800-023-000-0000	GIRLS WRESTLING TOURNAMENT 12/
	Payment Amount:		**300.00**		

0010029807

08/05/2026

**********300.00

PAY Three Hundred and 00/100 Dollars

To the Order of:

Wallenpaupack Girls Wrestling Booster Club
2552 US-6 E
HAWLEY PA 18428

NON-NEGOTIABLE

[redacted]

LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST

DATE: 7/30/26

PAID

AUG 05 2026

AMOUNT: $300.00

REQUEST A CHECK FROM 10 FUND PAYABLE TO:

Wallenpaupack Girls Wrestling Booster Club

REASON: Wrestling Tournament

SIGNATURE OF REQUESTOR:

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

ACCOUNT CODE(S):

DEBIT: 10-3250-810-000-30-800-023-000-0000

Wallenpaupack Girls Junior High Dual Tournament

Where: Wallenpaupack Area Middle School
139 Atlantic Avenue, Hawley, PA 18428

When: Saturday, December 5, 2026

PAID
AUG 05 2026

Weigh-ins: 8:30 A.M., school opens/scales available @ 7:30 A.M.

Coaches Meeting: 9:30 A.M.

Wrestling Begins: 10:00 A.M.

Weight Classes: 80,87,94,100,105,110,115,120,125,131,138,148,162,180,220

Rules: PIAA rules apply

Format: We will tentatively plan for an 8-team bracket, 3 dual matches, 4 mats

Seeding will be based on team record from 2025-26 season. Please send the attached roster (see below) **by Friday, 11/27** with wrestlers' 25-26 records, PJW honors/accolades (optional), and team accomplishments, if applicable.

Entry Fee: $300 a team or $20 per wrestler

Checks should be made out to "Wallenpaupack Girls Wrestling Booster Club". Must be paid in full by the date of the event.

Mail To: Wallenpaupack Area High School

Attn: Elana Carroll

2552 US-6 E, Hawley, PA 18428

Food: Hot and cold available throughout the day. Coaches room will be available as well.

Awards: Trophies for top 3 teams and Outstanding Wrestler

Questions: Contact Elana Carroll, 570-647-8181 or carrolel@wallenpaupack.org

Fan Admission: Adults $5.00 Students $2.00

2026 Wallenpaupack Girls Jr. High Dual Tournament

Saturday, December 5, 2026

Team:_____

Weight Class	Wrestler Name	Grade	2025-2026 Record	PJW/Other Honors (optional)
80				
87				
94				
100				
105				
110				
115				
120				
125				
131				
138				
148				
162				
180				
220				

Other Team Accolades/Accomplishments:

Vendor: WASTE MAN-Waste Management
PO Box 13648 PHILADELPHIA PA 19101-3648

Pymt # 0010029808
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
4032272-0203-9	07/20/2026		75.88	10-2620-411-000-10-200-000-026-0000	DISPOSAL SERVICES-EC
4032272-0203-9	07/20/2026		56.82	10-2620-411-000-20-500-000-026-0000	DISPOSAL SERVICES-MS
4032272-0203-9	07/20/2026		216.16	10-2620-411-000-30-800-000-026-0000	DISPOSAL SERVICES-HS
4032272-0203-9	07/20/2026		68.54	10-2620-411-000-00-100-000-026-0000	DISPOSAL SERVICES-ADMIN
4032272-0203-9	07/20/2026		111.99	10-2620-411-000-10-200-000-026-0000	DISPOSAL SERVICES-EC
4032272-0203-9	07/20/2026		108.08	10-2620-411-000-20-500-000-026-0000	DISPOSAL SERVICES-MS
4032272-0203-9	07/20/2026		113.64	10-2620-411-000-30-800-000-026-0000	DISPOSAL SERVICES-HS
4032272-0203-9	07/20/2026		112.05	10-2620-411-000-00-100-000-026-0000	DISPOSAL SERVICES-ADMIN
		Payment Amount:	**863.16**		

Vendor: WASTE MAN-Waste Management
PO Box 13648 PHILADELPHIA PA 19101-3648

Pymt # 0010029808
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
4032272-0203-9	07/20/2026		75.88	10-2620-411-000-10-200-000-026-0000	DISPOSAL SERVICES-EC
4032272-0203-9	07/20/2026		56.82	10-2620-411-000-20-500-000-026-0000	DISPOSAL SERVICES-MS
4032272-0203-9	07/20/2026		216.16	10-2620-411-000-30-800-000-026-0000	DISPOSAL SERVICES-HS
4032272-0203-9	07/20/2026		68.54	10-2620-411-000-00-100-000-026-0000	DISPOSAL SERVICES-ADMIN
4032272-0203-9	07/20/2026		111.99	10-2620-411-000-10-200-000-026-0000	DISPOSAL SERVICES-EC
4032272-0203-9	07/20/2026		108.08	10-2620-411-000-20-500-000-026-0000	DISPOSAL SERVICES-MS
4032272-0203-9	07/20/2026		113.64	10-2620-411-000-30-800-000-026-0000	DISPOSAL SERVICES-HS
4032272-0203-9	07/20/2026		112.05	10-2620-411-000-00-100-000-026-0000	DISPOSAL SERVICES-ADMIN
		Payment Amount:	**863.16**		

0010029808

08/05/2026

**********863.16

PAY Eight Hundred Sixty-Three and 16/100 Dollars

To the Order of:

Waste Management
PO Box 13648
PHILADELPHIA PA 19101-3648

NON-NEGOTIABLE

[redacted]

INVOICE

Customer ID: [redacted]
Customer Name: LEHIGHTON AREA SCHOOL
Service Period: 08/01/26-08/31/26
Invoice Date: 07/20/2026
Invoice Number: 4032272-0203-9

How to Contact Us	Your Payment is Due	Your Total Due
Visit wm.com/MyWM Create a My WM profile for easy access to your pickup schedule, service alerts and online tools for billing and more. Have a question? Check our support center or start a chat. **Customer Service: (800) 642-8850**	**08/19/2026** If full payment of the invoiced amount is not received within your contractual terms, you may be charged a monthly late charge of 2.5% of the unpaid amount, with a minimum monthly charge of $5, or such late charge allowed under applicable law, regulation or contract.	**$4,254.47** June 445.76 July 417.40 PAID AUG 05 2026

Previous Balance	+	Payments	+	Adjustments	+	Current Invoice Charges	=	Total Account Balance Due
3,391.31 PD		0.00		0.00		863.16		4,254.47

6/18/24 16029682

DETAILS OF SERVICE

Details for Service Location: **Customer ID** [redacted]
Lehighton Area Sd Admin, 1000 Union St, Lehighton PA 18235-1700

102620-411-000-00-0000-000-02-6

Description	Date	Ticket	Quantity	Amount
6 Yard Dumpster Service	06/23/26	349736	1.00	34.27
Ticket Total				**34.27**
8 Yard Dumpster Service - Recycle Materials (June 112.05)	06/24/26	352416	1.00	43.51
Ticket Total				**43.51**
6 Yard Dumpster Service	06/30/26	371298	1.00	34.27
Ticket Total				**34.27**
6 Yard Dumpster Service (July 48.54)	07/07/26	391220	1.00	34.27
Ticket Total				**34.27**

4.24.26

Please detach and send the lower portion with payment --- (no cash or staples)

WASTE MANAGEMENT OF PENNSYLVANIA, INC.
PEN ARGYL HAULING
PO BOX 3020
MONROE, WI 53566-8320
(800) 642-8850

Invoice Date	Invoice Number	Customer ID *(Include with your payment)*
07/20/2026		[redacted]
Payment Terms	**Total Due**	**Amount**
Total Due by 08/19/2026	$4,254.47	863.16

0203000048270672002040322720000008631600000425447 8

0014385 02 H 0.672 **AUTO T8 0 7199 18235-170000 -C04-P14399-I1 I0061C79

LEHIGHTON AREA SCHOOL
1000 UNION ST
LEHIGHTON PA 18235-1700

Remit To: **WM CORPORATE SERVICES, INC.**
AS PAYMENT AGENT
PO BOX 13648
PHILADELPHIA, PA 19101-3648

Printed on recycled paper.

0014385-0000001-0014842

203-0027869-0203-7

DETAILS OF SERVICE - continued

Details for Service Location:
Lehighton Area Sd Admin, 1000 Union St, Lehighton PA 18235-1700

Customer ID: 4-82706-72002

Description	Date	Ticket	Quantity	Amount
6 Yard Dumpster Service	07/14/26	411950	1.00	34.27
Ticket Total				**34.27**
6 Yard Dumpster Container Service Charge USAGE CHARGE	08/01/26		1.00	0.00
Total Charges for Service Location				180.59

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GREENER WAYS TO PAY

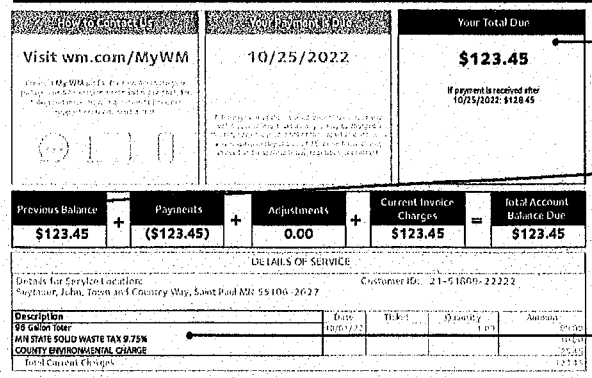
Please choose one of these sustainable payment options:

AutoPay
Set up recurring payments with us at **wm.com/myaccount**

Online
Use **wm.com** for quick and easy payments

By Phone
Pay 24/7 by calling 866-964-2729

HOW TO READ YOUR INVOICE



1. Your Total Due is the total amount of current charges and any previous unpaid Balances combined. This also states the date payment is due to WM, anything beyond that date may incur additional charges.
2. Previous balance is the total due from your previous invoice. We subtract any Payments Received/Adjustments and add your Current Charges from this billing cycle to get a Total Due on this invoice. If you have not paid all or a portion of your previous balance, please pay the entire Total Due to avoid a late charge or service interruption.
3. Service location details the total current charges of this invoice.

New Payment Platform

Here are more details about our enhanced online bill-pay system. Powered by Paymentus, the platform will provide more options and flexibility when managing and paying your bills.

Expanded payment options.
Pay with PayPal, Apple Pay, or Google Pay; via secure direct debit from a bank account; or by credit or debit card.

Anytime, anywhere payments.
Same great 24/7 availability so you can make payments when convenient or set it and forget it with AutoPay.

Complete Hub for account activity.
Continue to view and manage your bills directly from **My WM** (wm.com/mywm).

If your service is suspended for non-payment, you may be charged a Resume charge to restart your service. For each returned check, a charge will be assessed on your next invoice equal to the maximum amount permitted by applicable state law.

☐ Check Here to Change Contact Info

List your new billing information below. For a change of service address, please contact **WM**.

Address 1	
Address 2	
City	
State	
Zip	
Email	
Date Valid	

☐ Check Here to Sign Up for Automatic Payment Enrollment

If I enroll in Automatic Payment services, I authorize **WM** to pay my invoice by electronically deducting money from my bank account. I can cancel authorization by notifying **WM** at **wm.com** or by calling the customer service number listed on my invoice. Your enrollment could take 1-2 billing cycles for Automatic Payments to take effect. Continue to submit payment until page one of your invoice reflects that your payment will be deducted.

Email	
Date	
Bank Account Holder Signature	

NOTICE: By sending your check, you are authorizing the Company to use information on your check to make a one-time electronic debit to your account at the financial institution indicated on your check. The electronic debit will be for the amount of your check and may occur as soon as the same day we receive your check.

In order for us to service your account or to collect any amounts you may owe (for non-marketing or solicitation purposes), we may contact you by telephone at any telephone number that you provided in connection with your account, including wireless telephone numbers, which could result in charges to you. Methods of contact may include text messages and using pre-recorded/artificial voice messages and/or use of an automatic dialing device, as applicable. We may also contact you by email or other methods as provided in our contract.

Please send all bankruptcy correspondence to RMCbankruptcy@wm.com or 800 Capitol St. Ste 3000, Houston TX 77002. Using the email option will expedite your request. (this language is in compliance with 11 USC 342(c)(2) of the Bankruptcy Code)

0014385-0000001-0014842

Customer ID: [redacted]
Customer Name: LEHIGHTON AREA SCHOOL
Service Period: 08/01/26-08/31/26
Invoice Date: 07/20/2026
Invoice Number: 4032272-0203-9

DETAILS OF SERVICE - continued

Details for Service Location: **Customer ID** [redacted]
Lehighton Area Sd High School, 1 Indian Ln, Lehighton PA 18235-1192
10-2620-411-000-30-800-000-026

Description	Date	Ticket	Quantity	Amount
8 Yard Dumpster Service	06/23/26	349562	2.00	56.82
Ticket Total				**56.82**
8 Yard Dumpster Service	06/30/26	371300	2.00	56.82
Ticket Total				**56.82**
10 Yard Dumpster Service - Recycle Materials	07/01/26	374068	1.00	51.26
Ticket Total				**51.26**
8 Yard Dumpster Service	07/07/26	391222	2.00	56.82
Ticket Total				**56.82**
8 Yard Dumpster Service	07/14/26	411952	2.00	56.82
Ticket Total				**56.82**
10 Yard Dumpster Service - Recycle Materials	07/15/26	414577	1.00	51.26
Ticket Total				**51.26**
Total Charges for Service Location				329.80

June 113.44

PAID
AUG 05 2026

July 216.14

Details for Service Location: **Customer ID:** [redacted]
Lehighton Area Sd Middle, 301 Beaver Run Rd, Lehighton PA 18235-1130
10-2620-411-000-20-500-000-026

Description	Date	Ticket	Quantity	Amount
8 Yard Dumpster Service	06/23/26	349738	1.00	28.41
Ticket Total				**28.41**
10 Yard Dumpster Service - Recycle Materials	06/24/26	352414	1.00	51.26
Ticket Total				**51.26**
8 Yard Dumpster Service	06/30/26	371301	1.00	28.41
Ticket Total				**28.41**
8 Yard Dumpster Service	07/07/26	391223	1.00	28.41
Ticket Total				**28.41**
8 Yard Dumpster Service	07/14/26	411953	1.00	28.41
Ticket Total				**28.41**
Total Charges for Service Location				164.90

June 108.08

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AUG 05 2026

July 54.82

Details for Service Location: **Customer ID:** [redacted]
Lehighton Area Sd Elem Ctr, 3 Indian Ln, Lehighton PA 18235-1700
10-2620-411-000-10-200-000-026

Description	Date	Ticket	Quantity	Amount
8 Yard Dumpster Service	06/23/26	349737	1.00	37.94
Ticket Total				**37.94**
10 Yard Dumpster Service - Recycle Materials	06/24/26	352415	1.00	36.11
Ticket Total				**36.11**
8 Yard Dumpster Service	06/30/26	371299	1.00	37.94
Ticket Total				**37.94**
8 Yard Dumpster Service	07/07/26	391221	1.00	37.94
Ticket Total				**37.94**
8 Yard Dumpster Service	07/14/26	411951	1.00	37.94
Ticket Total				**37.94**

June 111.99

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AUG 05 2026

July 75.88

DETAILS OF SERVICE - continued

Details for Service Location:
Lehighton Area Sd Elem Ctr, 3 Indian Ln, Lehighton PA 18235-1700

Customer ID [redacted]

Description	Date	Ticket	Quantity	Amount
Total Charges for Service Location				187.87
Total Current Charges				**863.16**

Vendor: WEX BANK-WEX BANK
PO Box 5727 CAROL STREAM IL 60197

Pymt # 0010029809
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
114127783	07/31/2026		955.65	10-2620-626-000-00-130-000-026-0000	MONTHLY GAS BILL-JUL 26
		Payment Amount:	955.65		

Vendor: WEX BANK-WEX BANK
PO Box 5727 CAROL STREAM IL 60197

Pymt # 0010029809
08/05/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
114127783	07/31/2026		955.65	10-2620-626-000-00-130-000-026-0000	MONTHLY GAS BILL-JUL 26
		Payment Amount:	955.65		

0010029809

08/05/2026

**********955.65

PAY Nine Hundred Fifty-Five and 65/100 Dollars

To the Order of:

WEX BANK
PO Box 5727
CAROL STREAM IL 60197

NON-NEGOTIABLE

[redacted]

Exxon Mobil

Invoice Statement

INVOICE NUMBER: 114127783
ACCOUNT NAME: Lehighton Area School District

ACCOUNT NUMBER	CREDIT LIMIT	DAYS THIS PERIOD	BILL CLOSING DATE	PAYMENT DUE DATE**	AMOUNT DUE
369-662-894-4	2300.00	31	JUL-31-2026	AUG-26-2026	955.65

DATE	ACTIVITY DESCRIPTION	CHARGES / DEBITS	PAYMENTS / CREDITS
JUL-17-2026	Payment - Thank You		1210.15
JUL-31-2026	Fuel Purchases	948.43	
JUL-31-2026	Other Adjustments this Period	10.00	
JUL-31-2026	Rebates and Rebate Reversals		2.78

10-2620-686-000-00-130-000026

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AUG 05 2026

**Payment must process by Payment Due Date. Paper checks must be received at least two business days before Payment Due Date to enable on-time processing.

The Finance Charge is determined by applying a periodic rate of 0%

PURCHASES, RETURNS AND PAYMENTS MADE JUST PRIOR TO BILL CLOSING DATE MAY NOT APPEAR UNTIL THE NEXT INVOICE/STATEMENT.
SEE REVERSE SIDE FOR IMPORTANT INFORMATION AND TERMS.

8-4-26

PREVIOUS BALANCE	(-)PAYMENTS	(+)ACTIVITY THIS PERIOD	(-)SAVINGS THIS PERIOD	(=)NEW BALANCE
1210.15	1210.15	958.43	2.78	955.65

CALL CUSTOMER SERVICE TO PAY BY PHONE
FEDERAL TAX ID: 841425616

TO ENSURE PROPER CREDIT, TEAR AT PERFORATION AND INCLUDE BOTTOM PORTION WITH YOUR PAYMENT

ExxonMobil BusinessPro

ACCOUNT NAME	Lehighton Area School Dist
[redacted]	
INVOICE NUMBER	114127783
BILL CLOSING DATE	JUL-31-2026
AMOUNT DUE	955.65
AMOUNT ENCLOSED	955.65
PAYMENT DUE DATE	AUG-26-2026

PAYMENTS RECEIVED AFTER THIS DATE SUBJECT TO A FINANCE CHARGE.

Do not use for remittance
P.O. Box 639
Portland, ME 04104-0639

Make check payable to: WEX BANK
To avoid processing delays, remit all payments to:

Connie Ahner
Lehighton Area School District
1000 Union Street
Lehighton, PA 18235

WEX BANK
P.O. BOX 5727
CAROL STREAM IL 60197-5727

[redacted]

Balance Subject to Late Fees

If Company's fails to make payment in full by the applicable Due Date, or a payment is returned (each a "Payment Default"), then a fee (the "Late Fee") will apply to the Total Outstanding Balance (as defined below). The late fee will be calculated by multiplying the applicable late fee rate by the Total Outstanding Balance on the Calculation Date, not to exceed the amount allowable by applicable law. For Billing Cycles other than monthly, the percentage rate used in the Late Fee calculation will be prorated based on the length of the billing cycle in relation to a monthly billing cycle. Company will be considered to have made a payment to Issuer on an Account only when the payment is posted to the Account as provided in this Agreement. 7.2 The "Calculation Date" is the earlier of (a) the posting date for Company's payment in full of the invoiced amount to its Account, or (b) the last day of the Billing Cycle during which the Payment Default occurred. The "Total Outstanding Balance" is the invoiced amount, plus the amount of any unbilled Transactions delivered by a merchant to Issuer, and minus any credits that have posted to the Account, through the Calculation Date.

How to Dispute Your Invoice

Charges must be disputed in writing no later than sixty (60) days from the bill closing date or they will be considered final and binding.

Card Issuer

The card is issued and payable to WEX Bank under a Business Charge Account Agreement with the cardholder named on the reverse.

Customer Service

For account inquiries and correspondence regarding account service or billing:

- **Call 1-800-624-5140, or**
- **Email correspondence@wexinc.com, or**
- **Fax to 1-800-395-0809, or**
- **Mail to P.O. Box 639, Portland, ME 04104**

Do not mail payments to this address. Payments must be sent to the remit address on your invoice.

Be sure to include your account number on all correspondence.

Your full Business Card Agreement is available here:
https://www.wexdrive.com/tncs/exxonmobil.pdf

Payment Options

Mail
Be sure to include bottom portion of invoice with your payment. Write your account number or invoice number on the check to help avoid delays in payment processing if the check and remit stub become separated. Check payments can take up to two Business Days to process from the time the envelope containing a check arrives at Issuer's facility to posting of the check amount to the Account.

Allow 10 business days prior to the due date for mailing to help avoid late fees. Paper checks must be received at least two business days before Payment Due Date to enable on-time processing.

Online
Authorized users can elect to receive an email notification when an invoice is ready for online viewing and payment. Log in or register to set up an online account at www.exxonmobilbusinessonline.com.

Online payments scheduled by 3:30 PM ET (on business days) are credited to your account on the same day. There is no fee for online payments.

Phone
Call Customer Service to schedule a payment or check your balance.

Payments scheduled by 3:30 PM ET (on business days) are credited to your Account on the same day.

Be prepared with your fleet card account number and a sample check to enter your bank account number and routing number. There is no fee for phone payments.

ExxonMobil

Invoice Statement

INVOICE NUMBER: 114127783

[redacted]

If an adjustment is shown here and in the detail above, the amount listed here is a summed value of those individual charges.

DATE	TRANSACTION DESCRIPTION	FUNDED BY	REBATE PERIOD UNITS/DOLLARS	PERIOD AMT	REBATE YTD UNITS/DOLLARS	REBATE YTD AMT
	OTHER ADJUSTMENTS THIS PERIOD					
07-31	Paper Delivery Fee			10.00		
	Subtotal			10.00		
	REBATES AND REVERSALS					
08-03	ExxonMobil Rebate - T10	Partner	277.591	-2.78	1962.133	-19.63
	Subtotal			-2.78		-19.63
	Total			7.22		-19.63

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AUG 05 2026

Exxon Mobil

REPORT FOR:
Lehighton Area School District
369-662-894-4
JUL-01-2026 TO JUL-31-2026

Purchase Activity Report

CARD NUMBER	CARD EMBOSSING	VEHICLE/ASSET IDENTIFIER	VEHICLE DESCRIPTION	PLATE (ST)	VIN
0025	# 7 VAN	Van #7	# 7 Van	(PA)	1fmzk1zm2gka324b6

DATE MM-DD	TIME	SITE ADDRESS	TICKET NUMBER	PROMPT INFO	TRAN CODE	ODOM.	PROD	UNITS	COST/ UNIT	FUEL $	OTHER $	EXEMPT TAX	REBATE CODE	NET $	REPORTED TAX
		PREVIOUS ODOMETER				34,311									
07-12	09:24	24 Blakeslee Boulevard Dr E, Lehighton, PA	00009465	R Klotz	OP	34,594	UNL	18.007	3.799	68.41		-10.37		58.04	-3.30
07-12	13:54	24 Blakeslee Boulevard Dr E, Lehighton, PA	00009716	R Klotz	OP	34,789	UNL	11.566	3.799	43.94		-6.66		37.28	-2.12
07-22	12:01	24 Blakeslee Boulevard Dr E, Lehighton, PA	00019491	F Brown	OP	34,886	UNL	6.856	4.098	28.10		-3.95		24.15	-1.25
		PERIOD TOTALS				575		36.429		140.45		-20.98		119.47	-6.67
		YTD TOTALS				2,703		168.660		665.25		-97.11		568.14	-30.86
		PERIOD AVGS: DPU, PPU, CPD				15.78			3.855	0.24					
		YTD AVGS: DPU, PPU, CPD				16.03				0.25					

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AUG 05 2026

Transaction and Fee legend can be found on the last page of this report.

Exxon Mobil

REPORT FOR:
Lehighton Area School District
369-662-894-4
JUL-01-2026 TO JUL-31-2026

Purchase Activity Report

CARD NUMBER	CARD EMBOSSING	VEHICLE/ASSET IDENTIFIER	VEHICLE DESCRIPTION	PLATE (ST)	VIN
0026	100 GAS CAN	Gas Cans	Gas Cans		

DATE MM-DD	TIME	SITE ADDRESS	TICKET NUMBER	PROMPT INFO	TRAN CODE	ODOM.	PROD	UNITS	COST/ UNIT	FUEL $	OTHER $	EXEMPT TAX	REBATE CODE	NET $	REPORTED TAX
		PREVIOUS ODOMETER													
07-09	10:29	24 Blakeslee Boulevard Dr E, Lehighton, PA	00006539	E Lusch	OP	0	DSL	39.607	4.798	190.07		-29.35		160.72	-9.62
07-09	10:42	24 Blakeslee Boulevard Dr E, Lehighton, PA	00006546	E Lusch	OP	0	UNL	45.947	3.899	179.15		-26.47		152.68	-8.41
07-20	10:39	24 Blakeslee Boulevard Dr E, Lehighton, PA	00017490	E Lusch	OP	0	UNL	59.168	3.998	236.61		-34.08		202.53	-10.83
		PERIOD TOTALS				******		144.722		605.83		-89.90		515.93	-28.86
		YTD TOTALS				******		866.130		3,595.11		-543.78		3,051.33	-174.83
		PERIOD AVG: PPU				******			4.186	******					
		YTD AVG: PPU				******				******					

***** TO ENSURE MORE ACCURATE MILEAGE REPORTING, VEHICLE DISTANCE STATISTICS ARE NOT CALCULATED WHEN KEY ODOMETER READINGS ARE NOT WITHIN AN ACCEPTABLE RANGE.

PAID
AUG 05 2026

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Exxon Mobil

REPORT FOR:
Lehighton Area School District
369-662-894-4
JUL-01-2026 TO JUL-31-2026

Purchase Activity Report

CARD NUMBER	CARD EMBOSSING	VEHICLE/ASSET IDENTIFIER	VEHICLE DESCRIPTION	PLATE (ST)	VIN
0028	3 FORD DUMP TRK	Dump Truck	Dump Truck		

DATE MM-DD	TIME	SITE ADDRESS	TICKET NUMBER	PROMPT INFO	TRAN CODE	ODOM.	PROD	UNITS	COST/ UNIT	FUEL $	OTHER $	EXEMPT TAX	REBATE CODE	NET $	REPORTED TAX
		PREVIOUS ODOMETER				71,209									
07-08	11:09	24 Blakeslee Boulevard Dr E, Lehighton, PA	00005583	E Lusch	OP	71,368	UNL	26.097	3.698	96.53		-15.03		81.50	-4.78
		PERIOD TOTALS				159		26.097		96.53		-15.03		81.50	-4.78
		YTD TOTALS				******		102.500		318.11		-59.04		259.07	-18.77
		PERIOD AVGS: DPU, PPU, CPD				6.09			3.699	0.61					
		YTD AVG: PPU				******				******					

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PAID
AUG 05 2026

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Exxon Mobil

REPORT FOR:
Lehighton Area School District
369-662-894-4
JUL-01-2026 TO JUL-31-2026

Purchase Activity Report

CARD NUMBER	CARD EMBOSSING	VEHICLE/ASSET IDENTIFIER	VEHICLE DESCRIPTION	PLATE (ST)	VIN
0029	4 GMC PICKUP	GMC	4 GMC PICKUP		

DATE MM-DD	TIME	SITE ADDRESS	TICKET NUMBER	PROMPT INFO	TRAN CODE	ODOM.	PROD	UNITS	COST/ UNIT	FUEL $	OTHER $	EXEMPT TAX	REBATE CODE	NET $	REPORTED TAX
		PREVIOUS ODOMETER				6,267									
07-20	10:43	24 Blakeslee Boulevard Dr E, Lehighton, PA	00017501	E Lusch	OP	6,466	UNL	23.669	3.998	94.65		-13.63		81.02	-4.33
		PERIOD TOTALS				199		23.669		94.65		-13.63		81.02	-4.33
		YTD TOTALS				******		272.400		934.52		-161.89		772.63	-51.66
		PERIOD AVGS: DPU, PPU, CPD				8.41			3.999	0.48					
		YTD AVG: PPU				******				******					

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AUG 05 2026

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Exxon Mobil

REPORT FOR:
Lehighton Area School District
369-662-894-4
JUL-01-2026 TO JUL-31-2026

Purchase Activity Report

CARD NUMBER	CARD EMBOSSING	VEHICLE/ASSET IDENTIFIER	VEHICLE DESCRIPTION	PLATE (ST)	VIN
0032	# 6 VAN	Van #6	# 6 Van	(PA)	1FmZK1ZM9JKA61460

DATE MM-DD	TIME	SITE ADDRESS	TICKET NUMBER	PROMPT INFO	TRAN CODE	ODOM.	PROD	UNITS	COST/ UNIT	FUEL $	OTHER $	EXEMPT TAX	REBATE CODE	NET $	REPORTED TAX
		PREVIOUS ODOMETER				25,859									
07-12	13:56	24 Blakeslee Boulevard Dr E, Lehighton, PA	00009717	R Klotz	OP	26,166	UNL	20.322	3.798	77.20		-11.71		65.49	-3.72
07-22	12:01	24 Blakeslee Boulevard Dr E, Lehighton, PA	00019492	M Cremeens	OP	26,242	UNL	4.683	4.099	19.20		-2.70		16.50	-0.86
		PERIOD TOTALS				383		25.005		96.40		-14.41		81.99	-4.58
		YTD TOTALS				******		166.940		633.93		-96.15		537.78	-30.55
		PERIOD AVGS: DPU, PPU, CPD				15.32			3.855	0.25					
		YTD AVG: PPU				******				******					

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PAID
AUG 05 2026

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ExxonMobil

REPORT FOR:
Lehighton Area School District
369-662-894-4
JUL-01-2026 TO JUL-31-2026

Purchase Activity Report

CARD NUMBER	CARD EMBOSSING	VEHICLE/ASSET IDENTIFIER	VEHICLE DESCRIPTION	PLATE (ST)	VIN
0033	2 VAN	2V VAN	VAN-2		1GNZGZBG9E1213281

DATE MM-DD	TIME	SITE ADDRESS	TICKET NUMBER	PROMPT INFO	TRAN CODE	ODOM.	PROD	UNITS	COST/ UNIT	FUEL $	OTHER $	EXEMPT TAX	REBATE CODE	NET $	REPORTED TAX
		PREVIOUS ODOMETER				35,761									
06-30	19:00	24 Blakeslee Boulevard Dr E, Lehighton, PA	00063181	A Hozza	OP	35,948	UNL	13.246	3.699	49.00		-7.63		41.37	-2.42
07-14	20:21	24 Blakeslee Boulevard Dr E, Lehighton, PA	00012059	A Hozza	OP	36,062	UNL	8.423	3.799	32.00		-4.85		27.15	-1.54
		PERIOD TOTALS				301		21.669		81.00		-12.48		68.52	-3.96
		YTD TOTALS				******		119.680		470.79		-68.93		401.86	-21.89
		PERIOD AVGS: DPU, PPU, CPD				13.89			3.738	0.27					
		YTD AVG: PPU				******				******					

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PAID
AUG 05 2026

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