

Invoice Payment Selection Listing

Orland Park Health & Fitness Center (VOP)

Division Number: 00 MAIN DIVISION

Vendor Number/ Invoice Number	Dates			Invoice Amount	Discount Applied	Net Amount
	Invoice	Due	Discount			
AMPEST Ampest Exterminating & Wildlife Control						
Check Entry Number: 001						
25495	12/11/2025	12/11/2025		249.00	0.00	249.00
Comment:	Acct# ORL15430 - Monthly Svc Drain/Pest					
Vendor AMPEST Totals:				249.00	0.00	249.00
DYNEGY Vistra Vision LLC dba Dynegy Energy Services, LLC						
Check Entry Number: 001						
030160244004	1/1/2026	1/1/2026		25,369.78	0.00	25,369.78
Comment:	Acct # 400002226321 (11/25-12/28/25)					
Vendor DYNEGY Totals:				25,369.78	0.00	25,369.78
ECOLAB Ecolab Inc.						
Check Entry Number: 001						
6356810125	1/2/2026	2/1/2026		3,001.48	0.00	3,001.48
Comment:	Bill:503897480-AquaBal, MurAcid, Hypochl					
6356940243	1/10/2026	2/9/2026		1,500.61	0.00	1,500.61
Comment:	Bill:503897480-AquaBal					
Check Entry 001 Totals:				4,502.09	0.00	4,502.09
Vendor ECOLAB Totals:				4,502.09	0.00	4,502.09
NICORGA Northern Illinois Gas Company						
Check Entry Number: 001						
20260102	1/2/2026	1/2/2026		4,196.60	0.00	4,196.60
Comment:	Acct # 38-92-50-1039 9 (12/2/25-1/1/26)					
Vendor NICORGA Totals:				4,196.60	0.00	4,196.60
PERFORC Performance Chemical & Supply						
Check Entry Number: 001						
324226	11/4/2025	11/4/2025		895.92	0.00	895.92
Comment:	Cust #72623: Wipes					
325357	12/2/2025	12/2/2025		930.14	0.00	930.14
Comment:	Cust #72623: Wipes, Bleach, Vac Bags					
326901	1/13/2026	1/13/2026		1,268.26	0.00	1,268.26
Comment:	Cust #72623: Detergent, Bleach, Wipes					
Check Entry 001 Totals:				3,094.32	0.00	3,094.32
Vendor PERFORC Totals:				3,094.32	0.00	3,094.32
POWER Power Wellness Management LLC						
Check Entry Number: 001						
42352	1/9/2026	1/9/2026		5,524.27	0.00	5,524.27
Comment:	Misc. Bill - Dec. 2025					
42362	1/7/2026	1/7/2026		54.26	0.00	54.26
Comment:	Postage Reimbursement Jul-Dec 2025					
Check Entry 001 Totals:				5,578.53	0.00	5,578.53
Vendor POWER Totals:				5,578.53	0.00	5,578.53
XEROXFI Xerox Corporation dba						
Check Entry Number: 001						
41464656	1/12/2026	1/27/2026		570.00	0.00	570.00
Comment:	Contract #010-1001412-001 (12/01-01/31)					
Vendor XEROXFI Totals:				570.00	0.00	570.00
Division 00 Totals:				43,560.32	0.00	43,560.32
Report Totals:				43,560.32	0.00	43,560.32

Total number of checks: 7

Total number of checks not printed: 7



ACCOUNT ID	400002226321
BILL DATE	01/01/2026
INVOICE NUMBER	030160244004
CURRENT CHARGES	\$25,369.78 DUE BY 03/02/2026
TOTAL AMOUNT DUE	\$44,843.34

MB 01 000334 48570 B 1 A



Village of Orland Park
 ATTN: ACCOUNTS PAYABLE
 14700 RAVINIA AVE
 ORLAND PARK IL 60462-3134

RECEIVED
 By Lori Johnson at 4:26 pm, Jan 09, 2026

—To ensure prompt credit to your account, please detach and include this top portion of your statement with your payment —

GENERAL INFORMATION

Customer Service Contact Customer Care 1-844-441-0716 (Phone) DESBusinessCare@vistracorp.com	Make Checks Payable To: Dynegy Energy Services 27879 Network Place Chicago, IL 60673	Overnight Check Payment: JP Morgan Attn Lockbox 27879 Dynegy Energy Services 131 S Dearborn 6th Floor Chicago, IL 60603	Wire/ACH: Invoice #: 030160244004 ABA #: 071000013 Acct #: 581948291 Preferred Pay Method: ACH-CTX
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BILLING SUMMARY FOR ACCOUNT 400002226321

Date	Description	Charge
11/27/2025	Prior Balance	\$53,488.85
12/15/2025	Payment Received	-\$34,015.29
01/01/2026	Energy Charge	\$15,806.95
01/01/2026	Incremental Regulatory Cost	\$315.14
01/01/2026	Utility Delivery Service Charge	\$9,247.69
01/01/2026	Total Current Charges	\$25,369.78
01/01/2026	Total Amount Due	\$44,843.34

APPROVED: 01/14/2026 KK
 GL CODE: 672.001-5000-028

*If you have questions related to these items on the invoice, please call your local utility.

For power outages and other electrical emergencies, please call your electric distribution company (ComEd) at (800)-334-7661.

Balances not received by the due date are subject to a 1.5% late fee.

Thank you for the opportunity to supply your energy needs. We appreciate your business.

NOTE: This Page Intentionally left Blank



ACCOUNT NUMBER
4077853971

SERVICE LOCATION
15430 WEST AVE ORLAND PARK, IL 60462

SERVICE PERIOD: 11/25/2025 TO 12/28/2025

METER DETAIL

Meter Number	Service Period	Days	Prior Reading	Current Reading	Const	Total kWh	On-Pk kWh	Off-Pk kWh	Peak kW	Coincident Peak kW
230084469	11/25 - 12/28	34	NA	NA		184,294.632			414.77 at 12/14 07:00	

CHARGE DETAIL

Description	Quantity	Units	Rate	Charge	Totals
ENERGY SUPPLY CHARGES					
Energy Charge	184,294.632	KWH	\$0.08577000	\$15,806.95	
Incremental Regulatory Cost	184,294.632	KWH	\$0.00171000	\$315.14	
TOTAL ENERGY SUPPLY CHARGES					\$16,122.09
DELIVERY SERVICE CHARGES					
Retail Delivery Service - 0 to 100 kW					
Customer Charge		EA		\$166.90	
Standard Metering Charge		EA		\$13.31	
Peak Period DFC (9am-6pm, Mon-Fri excl. Holidays)	348.340	KW	\$14.28000000	\$4,974.30	
Off Peak DFC (All non-Peak hours)	424.560	KW		\$0.00	
IL Electricity Distribution Charge	184,295.000	KWH	\$0.00125000	\$230.37	
Single Bill Option Credit		EA		-\$0.69	
Carbon-Free Energy Resource Adj	184,295.000	KWH	-\$0.00276000	-\$508.65	
Coal to Solar and Energy Storage Fund	184,295.000	KWH	\$0.00007000	\$12.90	
Zero Emission Standard	184,295.000	KWH	\$0.00189000	\$348.32	
Renewable Portfolio Standard	184,295.000	KWH	\$0.00502000	\$925.16	
Energy Efficiency Programs	184,295.000	KWH	\$0.00835000	\$1,538.86	
Energy Transition Assistance	184,295.000	KWH	\$0.00072000	\$132.69	
Environmental Cost Recovery Adj	184,295.000	KWH	\$0.00010000	\$18.43	
Franchise Cost		DO	\$0.02061000	\$99.87	
Municipal Tax		EA		\$700.12	
State Tax		EA		\$561.58	
Late Payment Charge		EA		\$34.22	
*Charges/Credits from previous bill		EA		\$22,477.29	
TOTAL DELIVERY SERVICE CHARGES					\$9,247.69
TOTAL CURRENT CHARGES					\$25,369.78

ACCOUNT USAGE PROFILE

Month Billed	Total Demand	Avg Daily kWh	Avg Daily Temp
Current Month	348.34	5420.4	29.0
Last Month	337.78	5000.9	47.5
Last Year	308.5	5284.0	32.3





Invoice
6356810125

Bill To Address 503897480	Invoice Date	PO Number	Delivery Number
ORLAND PARK HEALTH P&S 15430 WEST AVE ORLAND PARK IL 60462-4661	01/02/2026	N/A	4517776618
	Supply Date	Order Number	Shipping Plant
	01/02/2026	141173406	JOLIET

Remit To Address	Ship To Address 503897480
Ecolab Inc. PO Box: 70343 CHICAGO IL 60673 USA FEIN 41-0231510	ORLAND PARK HEALTH P&S 15430 WEST AVE ORLAND PARK IL 60462-4661



Scan for Easy Pay

Sold To Address 503897480	Terms of Delivery and Payment
ORLAND PARK HEALTH P&S 15430 WEST AVE ORLAND PARK IL 60462-4661	Delivery Terms: DDP/EBS DDP Mode of Transportation: Road Payment Due Date: 02/01/2026 Payment Terms: Due within 30 days net

Customer Information

To prevent fraud, you must contact Customer Service or your Ecolab representative before changing remittance information.
To sign up for our convenient auto-pay program or to pay by ACH, please contact Customer Service at the phone number below.
Pay your invoice ONLINE through Ecolab Easy Pay - visit easypay.ecolab.com or scan QR code for access.

Item No	Material No	Description	Quantity	UOM	Unit Price	Amount
10	6117415	AQUA BAL TOTAL ALK 3-10LB Batch: 4495QC0200	16	CAR	83.24	1,331.84
20	6117413	AQUA BAL CALHYPO SH 30-1LB Batch: 1325QC0100	1	CAR	177.53	177.53
30	6118111	AB MURIATIC ACID 4-1GL Batch: 4445BC0100	20	CAR	0.00	0.00
40	6118145	BLUE SI CA HYPOCHLO 55LB Batch: C111253	4	BUC	369.84	1,479.36

Returns may be subject to a restocking fee.	Total Weight: 1,650.983 lbs	Sub Total	2,988.73
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Invoice Notes: APPROVED: 01/09/2026 MK GL CODE: 635004-5000-028	Mul. Shipping Chg(Wt)	12.75
	Total Before Taxes	3,001.48
	Sales Tax	0.00

For questions please contact Customer Service INSTITUTIONAL at 800-352-5326	PAYMENT DUE USD	3,001.48
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Unit price includes the rental fee for any dispensing equipment that may be provided by ECOLAB for the exclusive use of ECOLAB products. At such time as customer has consumed all ECOLAB products and fails to timely reorder the ECOLAB product, the rental agreement shall terminate, and ECOLAB will take possession of such dispensers. ECOLAB agrees to provide all servicing, repair and maintenance of such dispensers or replace any dispenser rendered unusable through normal use and wear. Payment of the invoice constitutes Customer's acceptance and agreement of the amount of any surcharge.



Invoice
6356940243

Bill To Address ORLAND PARK HEALTH P&S 15430 WEST AVE ORLAND PARK IL 60462-4661	503897480	Invoice Date 01/10/2026	PO Number N/A	Delivery Number N/A
		Supply Date 01/10/2026	Order Number 70876002	Shipping Plant JOLIET

Remit Electronic Payment to Bank Name – JP Morgan Routing - 071000013 Account - 5101921 Remittance Email – Finance-EDIReports@ecolab.com FEIN 41-0231510		Ship To Address ORLAND PARK HEALTH P&S 15430 WEST AVE ORLAND PARK IL 60462-4661	503897480
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Sold To Address ORLAND PARK HEALTH P&S 15430 WEST AVE ORLAND PARK IL 60462-4661	503897480	Terms of Delivery and Payment Delivery Terms: N/A Mode of Transportation: N/A Payment Due Date: 02/09/2026 Payment Terms: Due within 30 days net
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Ecolab Customer Information

To prevent fraud, you must contact Customer Service or your Ecolab representative before changing remittance information.
Pay your invoice ONLINE through Ecolab Easy Pay - visit easypay.ecolab.com or scan QR code for access.
 For Check payment remit to: Ecolab Inc. PO Box: 70343 CHICAGO IL 60673 USA

Item No	Material No	Description	Quantity	UOM	Unit Price	Amount
700241	EXP00305	Aqua Balance Cal Hypo Program	1	EA	1,500.61	1,500.61

Returns may be subject to a restocking fee.	Total Weight: 0.000 lbs	Sub Total	1,500.61
Invoice Notes: APPROVED: 01/12/2026 KK GL CODE: 652001-5000-028		Total Before Taxes	1,500.61
		Sales Tax	0.00

For questions please contact Customer Service INSTITUTIONAL at 800-352-5326 **PAYMENT DUE USD 1,500.61**

Unit price includes the rental fee for any dispensing equipment that may be provided by ECOLAB for the exclusive use of ECOLAB products. At such time as customer has consumed all ECOLAB products and fails to timely reorder the ECOLAB product, the rental agreement shall terminate, and ECOLAB will take possession of such dispensers. ECOLAB agrees to provide all servicing, repair and maintenance of such dispensers or replace any dispenser rendered unusable through normal use and wear. Payment of the invoice constitutes Customer's acceptance and agreement of the amount of any surcharge.

Page 1 of 1



Account Summary for Village of Orland Park

Account Number: 38-92-50-1039 9
 Meter Number: 3891295
 Service Address: 15430 S West Ave Orland Park
 Bill Period: 12/02/25 - 01/02/26 (31 days)
 Bill Issue Date: 01/02/26
 Total Previous Balance **\$7,471.82**
 Payment Received 12/12/2025 - Thank you! **-\$3,685.94**
 Remaining Balance **\$3,785.88**
 New Charges - Utility **\$4,196.60**
Total Amount Due by 02/19/2026 \$7,982.48

New Charges - Commercial - Heat
Rate 4: Commercial Service

Delivery Charges 12/02/2025 - 01/01/2026 \$1,169.12
 Monthly Customer Charge \$170.43
 First 150 Therms 150.00 @ \$0.2499 \$37.49
 151 - 5000 Therms 4,850.00 @ \$0.114 \$552.90
 Over 5000 Therms 2,328.39 @ \$0.105 \$244.48
 Environmental Cost Recovery 7,091.99 @ \$0.0028 = \$19.86
 Environmental Cost Recovery 236.40 @ \$0.0042 = \$0.99
 Government Agency Compensation Adjustment \$0.06
 Franchise Cost Adjustment \$0.11
 Efficiency Program 7,091.99 @ \$0.019 \$134.75
 Efficiency Program 236.40 @ \$0.0115 \$2.72
 Tax Cost Adjustment 7328.39 @ \$-0.0005 -\$3.66
 Rider LIDA \$8.79
 Rider LIDA \$0.20
Natural Gas Cost \$2,847.58
 December @ 7,091.99 Therms x \$0.3876 \$2,748.86
 January @ 236.40 Therms x \$0.4176 \$98.72
Taxes \$179.90
 Utility Fund Tax \$4,016.70 @ 0.1% \$4.02
 State Revenue Tax 7,328.39 @ \$0.024 = \$175.88
Total \$4,196.60

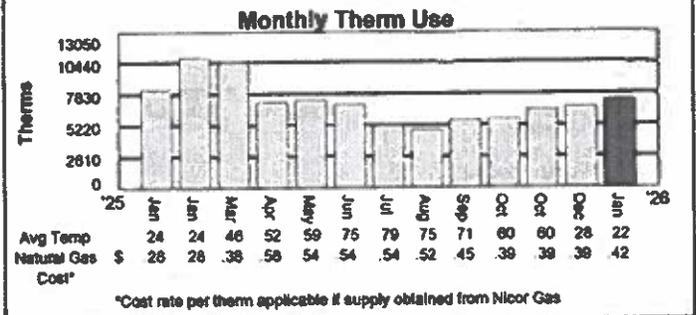
A Message for You

Your safety is important to us. Ask to see an employee ID when our field team is working in or around your premises.

Monthly Energy Profile

Current Reading	Previous Reading	Usage CCF	Pressure Factor	BTU Factor	Therms 7328.39	Avg. Daily Therms 2025	Avg. Daily Therms 2026
01/02/26 (Actual) 82890	12/02/25 (Actual) 56724	6166	1.133	1.049		265.88	236.40

CCF x Pressure Factor x BTU Factor = Therms



RECEIVED

By Lori Johnson at 4:27 pm, Jan 09, 2026

APPROVED: 01/14/2026 KK
GL CODE: 672 002 - 5000-028

Please see the reverse side of this bill for additional billing explanations.

Please do not include written inquiries as the stub is processed by machine. Return this portion with your check made payable to Nicor Gas.



PO Box 2020
Aurora, IL 60507-2020

AV 01 035378 23943H114 A**5DGT
 Village of Orland Park
 14700 S RAVINIA AVE
 ORLAND PARK IL 60462-3167

Please circle an amount to add a one-time charitable donation to Sharing:

\$5 \$10 \$25 \$50

Payment Due By
02/19/2026
\$7,982.48

Account Number:
3892501039 9

Previous billed balance is \$3785.88
Current bill \$4196.60 due by 02/19/2026

PO BOX 5407
CAROL STREAM IL 60197-5407



PERFORMANCE CHEMICAL & SUPPLY, INC.
 ENVIRONMENTAL SANITATION SPECIALISTS
 18633 S. 81ST AVENUE
 TINLEY PARK, IL 60487
 (708) 468-8241 FAX (708) 468-8246
www.performancechemical.com
TIN# 36-3104195

INVOICE NO.	INVOICE DATE	ORDER NO.	ORDER DATE
324226	11/04/25	137519	11/02/25
CUST NO.	SHIP DATE	TAX	PAGE
72623	11/04/25	101	1

INVOICE

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ORLAND PARK HEALTH & FITNESS
 15430 WEST AVE
 ORLAND PARK, IL 60462

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ORLAND PARK HEALTH & FITNESS
 15430 WEST AVE
 ORLAND PARK, IL 60462

****HISTORICAL****

CUSTOMER P. O. NO.						SALES REP.	SHIP VIA	TERMS		
						ROB TUCKER - WWL	OUR TRUCK	NET 30 A		
LINE	PRODUCT CODE	QUANTITY ORDERED	QUANTITY SHIPPED	BACK ORDERED	UNIT	DESCRIPTION	PRICE / UNIT	T X	EXTENDED PRICE	
1	US6955751	8	8		CT	EVERWIPES SURFACE CLNG,4 192830 WEBORDER 21435 <i>APPROVED: 01/12/2026 MK</i> <i>GL CODE: 635003-5000-028</i>	111.99 CT		895.92	
TOTAL PIECES SHIPPED		8		WAREHOUSE				SUBTOTAL		895.92
TOTAL WEIGHT		8						FREIGHT		
TOTAL CUBE		8						MISC TAX		
								INVOICE TOTAL		895.92



PERFORMANCE CHEMICAL & SUPPLY, INC.
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 TINLEY PARK, IL 60487
 (708) 468-8241 FAX (708) 468-8246
 www.performancechemical.com
 TIN# 36-3104195

INVOICE NO.	INVOICE DATE	ORDER NO.	ORDER DATE
325357	12/02/25	138545	11/28/25
CUST NO.	SHIP DATE	TAX	PAGE
72623	12/02/25	101	1

INVOICE

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ORLAND PARK HEALTH & FITNESS
 15430 WEST AVE
 ORLAND PARK, IL 60462

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ORLAND PARK HEALTH & FITNESS
 15430 WEST AVE
 ORLAND PARK, IL 60462

****HISTORICAL****

CUSTOMER P. O. NO.						SALES REP.	SHIP VIA	TERMS		
						ROB TUCKER - WWL	OUR TRUCK	NET 30 A		
LINE	PRODUCT CODE	QUANTITY ORDERED	QUANTITY SHIPPED	BACK ORDERED	UNIT	DESCRIPTION	PRICE / UNIT	T X	EXTENDED PRICE	
1	L13515	3	3		CTN	NDT BLEACH PLUS 5 GAL/CTN	90.08		270.24	
2	US6955751	6	6		CT	EVERWIPES SURFACE CLNG,4 192830	105.92		635.52	
3	MVPK6904294	2	2		PK	VACUUM BAG FOR TORNADO CV30 & CV38 ENVIRO-MAX NSS 10/PKG	12.19		24.38	
						WEBORDER 21667				
						APPROVED: 01/12/2026 MK				
						GL CODE: 635001-5000-028 \$24.38				
						635002-5000-028 \$270.24				
						635003-5000-028 \$635.52				
TOTAL PIECES SHIPPED		11						SUBTOTAL		930.14
TOTAL WEIGHT		165						FREIGHT		
TOTAL CUBE		6		WAREHOUSE				MISC TAX		
								INVOICE TOTAL		930.14



PERFORMANCE CHEMICAL & SUPPLY, INC.
 ENVIRONMENTAL SANITATION SPECIALISTS
 18633 S. 81st AVENUE
 TINLEY PARK, IL 60487
 (708) 468-8241 FAX (708) 468-8246
 www.performancechemical.com
TIN# 36-3104195

INVOICE NO.	INVOICE DATE	ORDER NO.	ORDER DATE
326901	01/13/26	139936	01/11/26
CUST NO.	SHIP DATE	TAX	PAGE
72623	01/13/26	101	1

INVOICE

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ORLAND PARK HEALTH & FITNESS
 15430 WEST AVE
 ORLAND PARK, IL 60462

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ORLAND PARK HEALTH & FITNESS
 15430 WEST AVE
 ORLAND PARK, IL 60462

CUSTOMER P. O. NO.					SALES REP.	SHIP VIA	TERMS		
					ROB TUCKER - WWL	OUR TRUCK	NET 30 A		
LINE	PRODUCT CODE	QUANTITY ORDERED	QUANTITY SHIPPED	BACK ORDERED	UNIT	DESCRIPTION	PRICE / UNIT	T X	EXTENDED PRICE
1	LY16005	2	2		CTN	GENTLE COMMERCIAL LAUNDRY SUDS & DETERGENT 5 GAL/CTN	108.18		216.36
2	L13515	2	2		CTN	NDT BLEACH PLUS 5 GAL/CTN	90.08		180.16
3	US6955751	8	8		CT	EVERWIPES SURFACE CLNG,4 192830	105.92		847.36
4	MVPK6904294	2	2		PK	VACUUM BAG FOR TORNADO CV30 & CV38 ENVIRO-MAX NSS 10/PKG	12.19		24.38
WEBORDER 21962									
<p>APPROVED: GL CODE: 635001-5000-028 \$ 24.38 635002-5000-028 \$ 216.36 635003-5000-028 \$ 635.52</p>									
TOTAL PIECES SHIPPED		14					SUBTOTAL		1268.26
TOTAL WEIGHT		114					FREIGHT		
TOTAL CUBE		8		WAREHOUSE			MISC TAX		
							INVOICE TOTAL		1268.26



Power Wellness Management, LLC
 851 Oak Creek Drive
 Lombard, IL 60148
 Phone 630.570.2600

Invoice #	42352
Invoice Date	1/9/2026

PO #	
Terms	

Bill To:
 Charmaine O'Sullivan
 Orland Park Health & Fitness Center
 15430 West Avenue
 Orland Park, IL 60462

APPROVED: 01/09/2026 KK
 GL CODE: LISTED

Project Name:	Misc. Bill - December 2025
<u>Explanation of Services:</u>	
11/30/2025 Ceridian Recruiting	619002-1000-028 \$ 150.73
11/30/2025 Hire Right - background checks	619002-1000-028 78.77
12/1/2025 Club Connect - Monthly Fee	652001-3000-028 50.00
12/1/2025 Les Mills - MOVE LM Virtual Content	62.50
12/6/2025 UPS charges - inv. #8V822F495	623002-1000-028 29.34
12/13/2025 UPS charges - inv. #8V822F505	623002-1000-028 20.20
12/16/2025 Verizon charges - K. Kuchenbecker	45.23
12/20/2025 UPS charges - inv. #8V822F515	623002-1000-028 29.04
12/27/2025 UPS charges - inv. #8V822F525	623002-1000-028 30.62
12/31/2025 CIBC Bank Fees	692002-1000-028 111.77
12/31/2025 Avocado Theory - payments	
12/1-12/15	201002-1000-028 343.92
12/16-12/31	418.82
12/31/2025 Jonas Fitness Fees	692002-1000-028 73.84
12/31/2025 Word Press Engine - website	661001-2000-028 144.00
12/31/2025 Insight America - Member Satisfaction Survey	1,450.00
12/31/2025 Medical Fitness Association - Annual License Fee	900.00
12/31/2025 Sage Software Checks & Forms	40.10
12/31/2025 Security and HIPAA Compliance Program	652001-1000-028 1,545.39
4,683 December billable members @ .33/member	
Total Amount Due:	\$ 5,524.27

Invoice



Power Wellness Management, LLC
851 Oak Creek Drive
Lombard, IL 60148
Phone 630-785-5056 Fax 630-785-5057

Invoice #	42362
Date:	1/7/2026
Payment Terms	Due Upon Receipt

623001-1000-028

Bill To:

Kinzie Kuchenbecker
Orland Park Health & Fitness Center
15430 West Avenue
Orland Park, IL 60462

Project Name: Postage Expense (July-December 2025)

Orland Park Health & Fitness Center

Explanation of Services:

Date	Description	Quantity	Price	Total
7/2/2025	Check Run - Vendor Payments	5	\$0.69	\$3.45
7/2/2025	Mailing of Check Stubs	1	\$0.97	\$0.97
8/1/2025	Check Run - Vendor Payments	8	\$0.74	\$5.92
8/1/2025	Mailing of Check Stubs	1	\$1.03	\$1.03
8/28/2025	Check Run - Vendor Payments	7	\$0.74	\$5.18
8/28/2025	Mailing of Check Stubs	1	\$1.03	\$1.03
9/29/2025	Check Run - Vendor Payments	9	\$0.74	\$6.66
9/29/2025	Mailing of Check Stubs	1	\$1.03	\$1.03
10/23/2025	Check Run - Vendor Payments	13	\$0.74	\$9.62
10/23/2025	Mailing of Check Stubs	1	\$1.03	\$1.03
11/26/2025	Check Run - Vendor Payments	7	\$0.74	\$5.18
11/26/2025	Mailing of Check Stubs	1	\$1.03	\$1.03
12/10/2025	Check Run - Vendor Payments	15	\$0.74	\$11.10
12/10/2025	Mailing of Check Stubs	1	\$1.03	\$1.03

Total Amount Due:

\$54.26

APPROVED: 01/08/2026 KK
GL CODE: 623002-1000-028



PO BOX 13604
Philadelphia, PA 19101-3604

ELECTRONIC SERVICE REQUESTED

INVOICE

Remittance Section

Customer Account Number: 1001412
Invoice Number: 41464656
Invoice Date: 01/12/2026
Invoice Due Date: Upon Receipt
Total Due: \$1,140.00

VILLAGE OF ORLAND PARK DBA ORLAND PARK HEALTH AND
15430 WEST AVE
ORLAND PARK IL 60462-4661

Amount Paid: \$ _____

Use enclosed envelope and make check payable to:

XEROX FINANCIAL SERVICES
PO BOX 13604
PHILADELPHIA, PA 19101-3604



01001004146465620000011400032

For faster processing, please remove the check skirt.

Keep lower portion for your records - Please return upper portion with your payment

Important Messages

**YOUR ACCOUNT IS SEVERELY PAST DUE
CALL OUR OFFICES IMMEDIATELY TO MAKE PAYMENT ARRANGEMENTS**

It is imperative that you call **844-815-8647** and talk to your

Account Representative about payment options.

We offer check by phone payment options.

You can also manage your account and pay online at: www.leaseservices.com.

CUSTOMER ACCOUNT NUMBER	INVOICE DATE	INVOICE NUMBER	DUE DATE	LAST PAYMENT RECEIVED
1001412	01/12/2026	41464656	Upon Receipt	09/02/2025

Charges Summary					
Contract PC#	Current Billing Period	Charge Description	Current Due	Past Due	Total Due
211-1001412-001	01/01/2026 - 01/31/2026	CONTRACT PAYMENT	\$285.00	\$855.00	\$1,140.00
		CONTRACT BALANCE DUE	\$285.00	\$855.00	\$1,140.00
		INVOICE TOTAL BALANCE DUE	\$285.00	\$855.00	\$1,140.00

APPROVED: 01/13/2026 KK
GL CODE: 652001-1000-028