

Vendor: ENERGY-Energy Technologies  
591 North Hunter Highway DRUMS PA 18222

Pymt # 0010029663  
07/10/2026

| Invoice # | Invoice Date PO # | Amount Account Code                        | Description                    |
|-----------|-------------------|--------------------------------------------|--------------------------------|
| 10483     | 07/01/2026        | 500.00 10-2620-432-000-00-100-000-026-0000 | PREVENTATIVE MAINTENANCE-ADMIN |
|           | Payment Amount:   | 500.00                                     | * Accrued A/P                  |

Vendor: ENERGY-Energy Technologies  
591 North Hunter Highway DRUMS PA 18222

Pymt # 0010029663  
07/10/2026

| Invoice # | Invoice Date PO # | Amount Account Code                        | Description                    |
|-----------|-------------------|--------------------------------------------|--------------------------------|
| 10483     | 07/01/2026        | 500.00 10-2620-432-000-00-100-000-026-0000 | PREVENTATIVE MAINTENANCE-ADMIN |
|           | Payment Amount:   | 500.00                                     | * Accrued A/P                  |

0010029663

07/10/2026

\*\*\*\*\*500.00

PAY Five Hundred and 00/100 Dollars

To the Order of:

Energy Technologies  
591 North Hunter Highway  
DRUMS PA 18222

NON-NEGOTIABLE

Bill To

LEHIGHTON SCHOOL DISTRICT  
1000 Union Street  
Lehigh, Pa 18235  
US

4th  
Quarter  
payment

**Invoice 10483**

Service Agreement  
Payment Terms

Jul 1, 2026

E-CPM-24-1045

Net 30

**PAID**

JUL 10 2026

**Total Due**

**\$500.00**

**Due Date**

**Jul 31, 2026**

CUSTOMER NAME

LEHIGHTON SCHOOL DISTRICT

PROPERTY NAME

LEHIGHTON SD ADMIN

PROPERTY ADDRESS

1000 UNION STREET  
Lehigh, PA 18235

AUTHORIZED BY

CUSTOMER WO

NTE

7-9-26

**Invoice Summary**

HVAC Preventative Maintenance Invoice

| Item Name                | Description              | Quantity | Unit Price | Price Subtotal |
|--------------------------|--------------------------|----------|------------|----------------|
| Preventative Maintenance | Preventative Maintenance | 1        | \$500.00   | \$500.00       |
|                          |                          | 1        |            | \$500.00       |

|                  |                 |
|------------------|-----------------|
| Subtotal         | \$500.00        |
| Taxable Subtotal | \$0.00          |
| Sales Tax Rate   | 0%              |
| Tax Amount       | \$0.00          |
| <b>Total</b>     | <b>\$500.00</b> |

**Terms of Service**

Thank you for your business.

Please make checks payable to Energy Technologies.

We accept - VISA - MASTERCARD - AMEX - DISCOVER

A convenience fee of 3% will be charged when using a credit card for payment.

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

Pymt # 0010029664  
07/10/2026

| Invoice #                  | Invoice Date | PO # | Amount    | Account Code | Description |
|----------------------------|--------------|------|-----------|--------------|-------------|
| Payment Amount:            |              |      | 658370.12 |              |             |
| SEE PAYMENT DETAIL LISTING |              |      |           |              |             |

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

Pymt # 0010029664  
07/10/2026

| Invoice #                  | Invoice Date | PO # | Amount    | Account Code | Description |
|----------------------------|--------------|------|-----------|--------------|-------------|
| Payment Amount:            |              |      | 658370.12 |              |             |
| SEE PAYMENT DETAIL LISTING |              |      |           |              |             |

0010029664

07/10/2026

\*\*\*\*\*658,370.12

PAY Six Hundred Fifty-Eight Thousand Three Hundred Seventy and 12/100 Dollars

To the Order of:

Public School Health Insurance Cooperative  
PO Box 5406  
LANCASTER PA 17606

NON-NEGOTIABLE



# Payment Detail Listing

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

Payment Number: 0010029664  
Payment Date: 07/10/2026

| Invoice #       | Invoice Date PO # | Amount Account Code                           | Description                    |
|-----------------|-------------------|-----------------------------------------------|--------------------------------|
| JULY 2026       | 07/10/2026        | 12653.91 10-0462-271-000-00-000-000-0000      | HEALTHCARE-JULY 26             |
| JULY 2026       | 07/10/2026        | 904.00 10-2140-271-000-20-500-000-000-0000    | Psychology Medical MS          |
| JULY 2026       | 07/10/2026        | 1162.29 10-2140-271-000-30-800-000-000-0000   | Psychology Medical HS          |
| JULY 2026       | 07/10/2026        | 1162.29 10-1225-271-000-30-800-000-000-0000   | SPEECH MEDICAL HIGH SCHOOL     |
| JULY 2026       | 07/10/2026        | 1291.43 10-2240-271-000-00-000-000-000-0000   | SELF-INS MED HEALTH            |
| JULY 2026       | 07/10/2026        | 1420.58 10-2620-281-000-00-000-000-000-0000   | OPEB RETIREE'S HEALTH          |
| JULY 2026       | 07/10/2026        | 1420.58 10-2250-271-000-10-200-000-000-0000   | Librarian Medical Elementary   |
| JULY 2026       | 07/10/2026        | 1420.58 10-2160-271-000-10-200-000-000-0000   | Social Worker Services-Medical |
| JULY 2026       | 07/10/2026        | 1420.58 10-1241-281-000-00-000-000-000-0000   | Learning Support OPEB          |
| JULY 2026       | 07/10/2026        | 1420.58 10-1110-281-000-30-800-000-000-0000   | Retirees Health Benefits HS    |
| JULY 2026       | 07/10/2026        | 1420.58 10-1110-281-000-20-500-000-000-0000   | Retirees Health Benefits MS    |
| JULY 2026       | 07/10/2026        | 1937.15 10-2839-271-000-00-000-000-000-0000   | Personnel Health               |
| JULY 2026       | 07/10/2026        | 2582.86 10-2140-271-000-10-200-000-000-0000   | Psychology Medical EC          |
| JULY 2026       | 07/10/2026        | 2841.15 10-2269-271-000-00-000-000-012-0000   | Special Ed Office Medical      |
| JULY 2026       | 07/10/2026        | 3228.58 10-2611-271-000-00-000-000-000-0000   | Maint Medical                  |
| JULY 2026       | 07/10/2026        | 3228.58 10-2514-271-000-00-000-000-000-0000   | Payroll Medical                |
| JULY 2026       | 07/10/2026        | 3228.58 10-2440-271-000-30-800-000-000-0000   | NURSE MEDICAL HIGH SCHOOL      |
| JULY 2026       | 07/10/2026        | 3228.58 10-2440-271-000-20-500-000-000-0000   | NURSE MEDICAL MIDDLE SCHOOL    |
| JULY 2026       | 07/10/2026        | 3228.58 10-2250-271-000-30-800-000-000-0000   | LIBRARIAN MEDICAL HIGH SCHOOL  |
| JULY 2026       | 07/10/2026        | 3228.58 10-2190-271-000-00-000-000-000-0000   | SELF-INS MED HEALTH            |
| JULY 2026       | 07/10/2026        | 3228.58 10-2170-271-000-00-000-000-000-0000   | PIMS Coordinator Medical       |
| JULY 2026       | 07/10/2026        | 3228.58 10-2160-271-000-30-800-000-000-0000   | Social Work Services Medical   |
| JULY 2026       | 07/10/2026        | 3228.58 10-2160-271-000-20-500-000-000-0000   | Social Work Services Medical   |
| JULY 2026       | 07/10/2026        | 3228.58 10-2125-271-000-30-800-000-000-0000   | GUIDANCE MEDICAL HIGH SCHOOL   |
| JULY 2026       | 07/10/2026        | 3228.58 10-2125-271-000-20-500-000-000-0000   | GUIDANCE MEDICAL MIDDLE SCHOOL |
| JULY 2026       | 07/10/2026        | 3228.58 10-1211-271-000-30-800-000-000-0000   | LIFE SKILL MEDICAL H/S         |
| JULY 2026       | 07/10/2026        | 4649.16 10-2120-271-000-30-800-000-000-0000   | GUIDANCE MEDICAL HIGH SCHOOL   |
| JULY 2026       | 07/10/2026        | 4649.16 10-2120-271-000-20-500-000-000-0000   | GUIDANCE MEDICAL MIDDLE SCHOOL |
| JULY 2026       | 07/10/2026        | 4842.87 10-3250-271-000-00-000-000-000-0000   | Athletics Medical Ins          |
| JULY 2026       | 07/10/2026        | 5359.44 10-1225-271-000-10-200-000-000-0000   | Speech Medical Elementary      |
| JULY 2026       | 07/10/2026        | 6134.30 10-2120-271-000-10-200-000-000-0000   | Guidance Medical Elementary    |
| JULY 2026       | 07/10/2026        | 6457.16 10-2620-271-000-00-000-000-000-0000   | Maintenance Group Benefits     |
| JULY 2026       | 07/10/2026        | 6457.16 10-2440-271-000-10-200-000-000-0000   | NURSE MEDICAL Elemtry          |
| JULY 2026       | 07/10/2026        | 6457.16 10-2360-271-000-00-000-000-000-0000   | SUPER/ASST MEDICAL             |
| JULY 2026       | 07/10/2026        | 6457.16 10-2250-271-000-20-500-000-000-0000   | LIBRARIAN MEDICAL M/S          |
| JULY 2026       | 07/10/2026        | 6457.16 10-1801-271-217-10-200-000-000-0000   | Pre-K Medical - Elementary     |
| JULY 2026       | 07/10/2026        | 6457.16 10-1190-271-411-10-200-000-000-0000   | Title I Medical - Elementary   |
| JULY 2026       | 07/10/2026        | 7102.88 10-2818-271-000-00-000-000-000-0000   | TECHNOLOGY MEDICAL             |
| JULY 2026       | 07/10/2026        | 7813.17 10-2513-271-000-00-000-000-000-0000   | Business Medical               |
| JULY 2026       | 07/10/2026        | 7813.17 10-2260-271-000-00-000-000-000-0000   | CURR/GRANT MEDICAL             |
| JULY 2026       | 07/10/2026        | 7942.31 10-2380-271-000-20-500-000-000-0000   | PRINCIPAL MEDICAL M/SCHOOL     |
| JULY 2026       | 07/10/2026        | 7942.31 10-1231-271-000-30-800-000-000-0000   | EMOTIOANL SUPPORT MEDICAL H/S  |
| JULY 2026       | 07/10/2026        | 9362.89 10-2620-271-000-30-800-000-000-0000   | Oper Bld Srvs Medical HS       |
| JULY 2026       | 07/10/2026        | 9750.31 10-1231-271-000-20-500-000-000-0000   | EMOTIOANL SUPPORT MEDICAL M/S  |
| JULY 2026       | 07/10/2026        | 9750.31 10-1211-271-000-20-500-000-000-0000   | LIFE SKILLS MEDICAL M/S        |
| JULY 2026       | 07/10/2026        | 10783.46 10-2620-271-000-20-500-000-000-0000  | Oper Bld Srvs Medical MS       |
| JULY 2026       | 07/10/2026        | 11170.89 10-2380-271-000-10-200-000-000-0000  | Principal Medical Elementary   |
| JULY 2026       | 07/10/2026        | 11170.89 10-0132-000-000-00-000-000-000-0000  | DUE FROM FOOD SERVICE          |
| JULY 2026       | 07/10/2026        | 11364.61 10-2380-271-000-30-800-000-000-0000  | PRINCIPAL MEDICAL H/SCHOOL     |
| JULY 2026       | 07/10/2026        | 12591.47 10-2620-271-000-10-200-000-000-0000  | Maint. Medical Elementary      |
| JULY 2026       | 07/10/2026        | 12591.47 10-1211-271-000-10-200-000-000-0000  | Life Skills Medical Elementary |
| JULY 2026       | 07/10/2026        | 14012.04 10-1231-271-000-10-200-000-000-0000  | Emotion Supp Medical Elementry |
| JULY 2026       | 07/10/2026        | 15820.05 10-1241-271-000-20-500-000-000-0000  | LEARNING SUPPORT MEDICAL M/S   |
| JULY 2026       | 07/10/2026        | 24149.79 10-1241-271-000-30-800-000-000-0000  | LEARNING SUPPORT MEDICAL H/S   |
| JULY 2026       | 07/10/2026        | 24149.79 10-1241-271-000-10-200-000-000-0000  | Learning Supp. Medical Element |
| JULY 2026       | 07/10/2026        | 78519.09 10-1110-271-000-20-500-000-000-0000  | Teacher Medical Ins MS         |
| JULY 2026       | 07/10/2026        | 85686.54 10-1110-271-000-30-800-000-000-0000  | Instruction Medical HS         |
| JULY 2026       | 07/10/2026        | 142703.27 10-1110-271-000-10-200-000-000-0000 | Instruction Medical Elementary |
| Payment Amount: |                   | 658370.12                                     |                                |

# Public School Health Insurance Cooperative 2026-27

## Lehigh Area School District

Month: July

Plan Name: HDHP

**PAID**

JUL 10 2026

*Highmark ASO Fee*

130 x \$51.00 = \$6,630.00

*Specific Premium*

Single 30 x \$119.31 = \$3,579.30

Multi-Party 100 x \$295.05 = \$29,505.00

*Spec Share Fund*

Single 30 x \$195.19 = \$5,855.70

Multi-Party 100 x \$468.47 = \$46,847.00

*Aggregate Premium*

130 x \$8.00 = \$1,040.00

*Claims Fund*

90% of Max Single 30 x \$999.21 = \$29,976.30

90% of Max Multi-Party 100 x \$2,398.10 = \$239,810.00

*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: \$375,605.00**

# Public School Health Insurance Cooperative 2026-27

## Lehigh Area School District

Month: July

Plan Name: PPO \$0

**PAID**  
JUL 10 2026

### 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**

# Public School Health Insurance Cooperative 2026-27

## Lehigh Area School District

Month: July

### Totals

|                                   | Member Count | Funding             |
|-----------------------------------|--------------|---------------------|
| <i>Highmark ASO Fee</i>           | 232          | \$11,832.00         |
| <i>Specific Premium</i>           |              |                     |
| Single                            | 60           | \$7,158.60          |
| Multi-Party                       | 172          | \$50,748.60         |
| <i>Spec Share Fund</i>            |              |                     |
| Single                            | 60           | \$11,711.40         |
| Multi-Party                       | 172          | \$80,576.84         |
| <i>Aggregate Premium</i>          |              |                     |
|                                   | 232          | \$1,856.00          |
| <i>Claims Fund</i>                |              |                     |
| 90% of Max   Single               | 60           | \$59,952.60         |
| 90% of Max   Multi-Party          | 172          | \$412,473.20        |
| <i>Benecon Administrative Fee</i> |              |                     |
|                                   | 232          | \$5,967.04          |
| <i>Broker Fee</i>                 |              |                     |
|                                   | 232          | \$10,804.24         |
| <i>Healthiest You</i>             |              |                     |
|                                   | 232          | \$2,378.00          |
| <i>Innovu Fee</i>                 |              |                     |
|                                   | 232          | \$1,055.60          |
| <i>Fedlogic Fee</i>               |              |                     |
|                                   | 232          | \$812.00            |
| <i>Apex Fee</i>                   |              |                     |
|                                   | 232          | \$1,044.00          |
| <b>Total Due:</b>                 |              | <b>\$658,370.12</b> |

**PAID**  
JUL 10 2026

c2  
2/1/26

Vendor: UGI UTIL-UGI Utilities Inc.  
PO Box 15503 WILMINGTON DE 19886-5503

Pymt # 0010029665  
07/10/2026

| Invoice #       | Invoice Date PO # | Amount Account Code                        | Description                    |
|-----------------|-------------------|--------------------------------------------|--------------------------------|
| 501004326670    | 06/30/2026        | 893.49 10-2620-621-000-20-500-000-026-0000 | NATURAL GAS TRANSPORTATION-JUN |
| 508004281752    | 06/30/2026        | 642.28 10-2620-621-000-30-800-000-026-0000 | NATURAL GAS TRANSPORTATION-JUN |
| Payment Amount: |                   | 1535.77                                    | * Accrued A/P                  |

Vendor: UGI UTIL-UGI Utilities Inc.  
PO Box 15503 WILMINGTON DE 19886-5503

Pymt # 0010029665  
07/10/2026

| Invoice #       | Invoice Date PO # | Amount Account Code                        | Description                    |
|-----------------|-------------------|--------------------------------------------|--------------------------------|
| 501004326670    | 06/30/2026        | 893.49 10-2620-621-000-20-500-000-026-0000 | NATURAL GAS TRANSPORTATION-JUN |
| 508004281752    | 06/30/2026        | 642.28 10-2620-621-000-30-800-000-026-0000 | NATURAL GAS TRANSPORTATION-JUN |
| Payment Amount: |                   | 1535.77                                    | * Accrued A/P                  |

0010029665

07/10/2026

\*\*\*\*\*1,535.77

PAY One Thousand Five Hundred Thirty-Five and 77/100 Dollars

To the Order of:

UGI Utilities Inc.  
PO Box 15503  
WILMINGTON DE 19886-5503

NON-NEGOTIABLE



**Billing Summary for Service to:**  
LEHIGHTON AREA SCHOOL DISTRICT  
1 INDIAN LN TRANSP  
LEHIGHTON PA 18235-2311

**Rate Classification:**

Delivery Service

**Billing Period:**

06/01/2026 to 06/30/2026 (30 days)

Actual Read

**Questions?**

Call (800) 276-2722 or write to UGI at

PO Box 13009

Reading, PA 19612-3009

Fed I. D. 23-1174060

**Past Bill Information**

The balance on your last bill was ..... \$792.61

Thank you for your payment of ..... -792.61

Amount due as of 07/02/2026 ..... 0.00

**Current Bill Information**

Customer Charge ..... 300.00

Distribution Charge ..... 217.92

Capacity Charge ..... 117.41

Natural Gas System Improvement Charge ..... 0.26

Monthly Balancing Service ..... 1.13

No Notice Service ..... 5.50

PA State Tax Surcharge ..... 0.06

Current Charges ..... 642.28

**Utility charges owed this bill** ..... **\$642.28**

**Total Amount Due By 08/03/2026** ..... **\$642.28**

Account Number



**PAID**

JUL 10 2026

Meter Information - Next Read Date July 31, 2026

| Billable Usage Information | CCF Billed | MCF Billed |
|----------------------------|------------|------------|
|                            | 639        | 63.9       |

**Important message(s) from UGI**

■ Please call 866-615-0571 if you have any questions regarding this bill.

■ \*\*\*\*\* WORKSHEET CONTROL #: 10567955 \*\*\*\*\*

■ Help prevent pipeline damage, accidents and service disruptions. Call 811 before you dig.

10-2620-621-000-30-800-000-026

*[Handwritten signature]*  
7/9/26

If you pay at a payment agent please take your entire bill. Make check payable to UGI.

Keep this part for your records. Important information is on the back of this bill.



UGI Utilities, Inc.  
PO Box 15503  
Wilmington, DE 19850-5503

Account Number



Please pay by the due date to avoid the late charge.  
Please return this portion with your payment.

AV 01 010209 16342H 38 C\*\*5DGT



LEHIGHTON AREA SCHOOL DISTRICT

HIGH SCHOOL

1000 UNION ST

LEHIGHTON PA 18235-1700

Due Date

August 03, 2026

Amount Due

\$642.28

With Late Charge

\$674.39



Energy to do more®

**Billing Summary for Service to:**  
LEHIGHTON AREA SCHOOL DISTRICT  
301 BEAVER RUN RD TRANSP  
LEHIGHTON PA 18235-1130

**Rate Classification:**

Delivery Service

**Billing Period:**

06/01/2026 to 06/30/2026 (30 days)

Actual Read

**Questions?**

Call (800) 276-2722 or write to UGI at

PO Box 13009

Reading, PA 19612-3009

Fed I. D. 23-1174060

**Past Bill Information**

The balance on your last bill was ..... \$1,185.89  
Thank you for your payment of ..... -1,185.89  
Amount due as of 07/02/2026 ..... 0.00

**Current Bill Information**

Customer Charge ..... 300.00  
Distribution Charge ..... 350.93  
Capacity Charge ..... 234.82  
Natural Gas System Improvement Charge ..... 0.33  
Monthly Balancing Service ..... 1.82  
No Notice Service ..... 5.50  
PA State Tax Surcharge ..... 0.09  
Current Charges ..... 893.49

Utility charges owed this bill ..... \$893.49

Total Amount Due By 08/03/2026 ..... \$893.49

Account Number

**PAID**

JUL 10 2026

**Meter Information - Next Read Date July 31, 2026**

| Billable Usage Information | CCF Billed | MCF Billed |
|----------------------------|------------|------------|
|                            | 1029       | 102.9      |

**Important message(s) from UGI**

■ Please call 866-615-0571 if you have any questions regarding this bill.

■ \*\*\*\*\* WORKSHEET CONTROL #: 10567956 \*\*\*\*\*

■ Help prevent pipeline damage, accidents and service disruptions. Call 811 before you dig.

10-2620-1621-000-20-500-000-026

*[Handwritten signature]*  
7-9-26

If you pay at a payment agent please take your entire bill. Make check payable to UGI.  
Keep this part for your records. Important information is on the back of this bill.



Energy to do more®

UGI Utilities, Inc.  
PO Box 15503  
Wilmington, DE 19850-5503

Account Number

Please pay by the due date to avoid the late charge.  
Please return this portion with your payment.

AV 01 010210 16342H 38 C\*\*5DGT

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

**Due Date**

August 03, 2026

**Amount Due**

\$893.49

**With Late Charge**

\$938.16

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

Pymt # 0010029666  
07/10/2026

| Invoice # | Invoice Date PO # | Amount Account Code                         | Description             |
|-----------|-------------------|---------------------------------------------|-------------------------|
| 113450104 | 06/30/2026        | 1210.15 10-2620-626-000-00-130-000-026-0000 | MONTHLY GAS BILL-JUN 26 |
|           | Payment Amount:   | 1210.15                                     | * Accrued A/P           |

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

Pymt # 0010029666  
07/10/2026

| Invoice # | Invoice Date PO # | Amount Account Code                         | Description             |
|-----------|-------------------|---------------------------------------------|-------------------------|
| 113450104 | 06/30/2026        | 1210.15 10-2620-626-000-00-130-000-026-0000 | MONTHLY GAS BILL-JUN 26 |
|           | Payment Amount:   | 1210.15                                     | * Accrued A/P           |

0010029666

07/10/2026

\*\*\*\*\*1,210.15

PAY One Thousand Two Hundred Ten and 15/100 Dollars

To the Order of:

WEX BANK  
PO Box 5727  
CAROL STREAM IL 60197

NON-NEGOTIABLE



# Invoice Statement

INVOICE NUMBER: 113450104  
ACCOUNT NAME: Lehigh Area School District

PAGE 1

| ACCOUNT NUMBER | CREDIT LIMIT | DAYS THIS PERIOD | BILL CLOSING DATE | PAYMENT DUE DATE** | AMOUNT DUE |
|----------------|--------------|------------------|-------------------|--------------------|------------|
| [REDACTED]     | 2300.00      | 30               | JUN-30-2026       | JUL-24-2026        | 1210.15    |

| DATE                                                                                                                                                                                                                                                                                                                                 | ACTIVITY DESCRIPTION          | CHARGES / DEBITS | PAYMENTS / CREDITS |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------|--------------------|
| JUN-10-2026                                                                                                                                                                                                                                                                                                                          | Payment - Thank You           |                  | 880.36             |
| JUN-30-2026                                                                                                                                                                                                                                                                                                                          | Fuel Purchases                | 1203.65          |                    |
| JUN-30-2026                                                                                                                                                                                                                                                                                                                          | Other Adjustments this Period | 10.00            |                    |
| JUN-30-2026                                                                                                                                                                                                                                                                                                                          | Rebates and Rebate Reversals  |                  | 3.50               |
| <div><b>PAID</b><br/>JUL 10 2026</div> <div>10-2620-626-000-00-130-000-026</div> <div><b>**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.</b><br/>The Finance Charge is determined by applying a periodic rate of 0%</div> |                               |                  |                    |

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.

| PREVIOUS BALANCE | (-)PAYMENTS | (+)ACTIVITY THIS PERIOD | (-)SAVINGS THIS PERIOD | (=)NEW BALANCE |
|------------------|-------------|-------------------------|------------------------|----------------|
| 880.36           | 880.36      | 1213.65                 | 3.50                   | 1210.15        |

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

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

|                   |                         |
|-------------------|-------------------------|
| ACCOUNT NAME      | Lehigh Area School Dist |
| ACCOUNT NUMBER    | [REDACTED]              |
| INVOICE NUMBER    | 113450104               |
| BILL CLOSING DATE | JUN-30-2026             |
| AMOUNT DUE        | 1210.15                 |
| AMOUNT ENCLOSED   | 1210.15                 |
| PAYMENT DUE DATE  | JUL-24-2026             |

PAYMENTS RECEIVED AFTER THIS DATE SUBJECT TO A FINANCE CHARGE.

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

Lehigh Area School District  
1000 Union Street  
Lehigh, PA 18235

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



## 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](mailto: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](http://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.



# Invoice Statement

INVOICE NUMBER: 113450104  
ACCOUNT NAME: Lehigh Area School District

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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<br>UNITS/DOLLARS | PERIOD AMT | REBATE YTD<br>UNITS/DOLLARS | REBATE YTD AMT |
|-------|-----------------------------------------------------|-----------|--------------------------------|------------|-----------------------------|----------------|
| 06-30 | OTHER ADJUSTMENTS THIS PERIOD<br>Paper Delivery Fee |           |                                | 10.00      |                             |                |
|       | Subtotal                                            |           |                                | 10.00      |                             |                |
| 07-01 | REBATES AND REVERSALS<br>ExxonMobil Rebate - T10    | Partner   | 349.617                        | -3.50      | 1684.542                    | -16.85         |
|       | Subtotal                                            |           |                                | -3.50      |                             | -16.85         |
|       | Total                                               |           |                                | 6.50       |                             | -16.85         |

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REPORT FOR:  
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JUN-01-2026 TO JUN-30-2026

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# Purchase Activity Report

| CARD NUMBER |       | CARD EMBOSSING                                                  | VEHICLE/ASSET IDENTIFIER |             | VEHICLE DESCRIPTION |                      | PLATE (ST) |           | VIN     |          |            |             |        |              |
|-------------|-------|-----------------------------------------------------------------|--------------------------|-------------|---------------------|----------------------|------------|-----------|---------|----------|------------|-------------|--------|--------------|
|             |       | FORD EXPLORER                                                   | Ford Explorer            |             | Ford Explorer       |                      |            |           |         |          |            |             |        |              |
| DATE        | TIME  | SITE ADDRESS                                                    | TICKET NUMBER            | PROMPT INFO | TRAN CODE           | ODOM                 | PROD UNITS | COST/UNIT | FUEL \$ | OTHER \$ | EXEMPT TAX | REBATE CODE | NET \$ | REPORTED TAX |
| 06-12       | 10:22 | PREVIOUS ODOMETER<br>24 Blakeslee Boulevard Dr E, Lehighton, PA | 00045408                 |             | OP                  | 90,857<br>90,829 UNL | 10,247     | 3.999     | 40.98   |          |            |             | 35.08  | -1.88        |
|             |       | PERIOD TOTALS                                                   |                          |             |                     | 72                   | 10,247     |           | 40.98   |          |            |             | 35.08  | -1.88        |
|             |       | YTD TOTALS                                                      |                          |             |                     | 413                  | 45,290     |           | 187.61  |          |            |             | 141.53 | -8.29        |
|             |       | PERIOD AVGS: DPU, PPU, CPD                                      |                          |             |                     | 7.03                 |            | 3.999     | 0.57    |          |            |             |        |              |
|             |       | YTD AVGS: DPU, PPU, CPD                                         |                          |             |                     | 9.12                 |            |           | 0.41    |          |            |             |        |              |

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## Purchase Activity Report

| CARD NUMBER                                                                                                                                                    |       | CARD EMBOSSING                          |               | VEHICLE/ASSET IDENTIFIER |           | VEHICLE DESCRIPTION |            | PLATE (ST) |          | VIN      |            |             |          |              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------|---------------|--------------------------|-----------|---------------------|------------|------------|----------|----------|------------|-------------|----------|--------------|
|                                                                                                                                                                |       | 100 GAS CAN                             |               | Gas Cars                 |           | Gas Cars            |            |            |          |          |            |             |          |              |
| DATE                                                                                                                                                           | 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                                                                                                                                              |       |                                         |               |                          |           |                     |            |            |          |          |            |             |          |              |
| 06-02                                                                                                                                                          | 06:53 | 24 Blakeslee Boulevard Dr E, Lehigh, PA | 00035435      |                          | OP        | 0 UNL               | 50.031     | 4.248      | 212.56   |          |            |             | 183.76   | -9.16        |
| 06-12                                                                                                                                                          | 06:31 | 24 Blakeslee Boulevard Dr E, Lehigh, PA | 00045275      |                          | OP        | 0 DSL               | 39.330     | 4.798      | 188.74   |          |            |             | 159.60   | -9.56        |
| 06-12                                                                                                                                                          | 06:54 | 24 Blakeslee Boulevard Dr E, Lehigh, PA | 00045291      |                          | OP        | 0 UNL               | 56.904     | 3.999      | 227.56   |          |            |             | 194.78   | -10.41       |
| 06-19                                                                                                                                                          | 06:54 | 24 Blakeslee Boulevard Dr E, Lehigh, PA | 00052033      |                          | OP        | 0 UNL               | 59.614     | 3.839      | 228.86   |          |            |             | 194.52   | -10.91       |
| 06-23                                                                                                                                                          | 09:24 | 24 Blakeslee Boulevard Dr E, Lehigh, PA | 00055925      |                          | OP        | 0 UNL               | 19.688     | 3.759      | 74.01    |          |            |             | 62.67    | -3.60        |
| 06-26                                                                                                                                                          | 10:51 | 24 Blakeslee Boulevard Dr E, Lehigh, PA | 00058819      |                          | OP        | 0 UNL               | 50.497     | 3.739      | 188.81   |          |            |             | 159.72   | -9.24        |
| PERIOD TOTALS                                                                                                                                                  |       |                                         |               |                          |           | *****               | 276.064    |            | 1,120.56 |          |            |             | 955.05   | -52.88       |
| YTD TOTALS                                                                                                                                                     |       |                                         |               |                          |           | *****               | 721.400    |            | 2,989.28 |          |            |             | 2,535.40 | -145.97      |
| PERIOD AVG: PPU                                                                                                                                                |       |                                         |               |                          |           | *****               |            | 4.059      |          |          |            |             |          |              |
| 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. |       |                                         |               |                          |           |                     |            |            |          |          |            |             |          |              |

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# Purchase Activity Report

| CARD NUMBER |       | CARD EMBOSSING                                               |               | VEHICLE/ASSET IDENTIFIER |           | VEHICLE DESCRIPTION |            | PLATE (ST) |         | VIN      |            |             |        |              |
|-------------|-------|--------------------------------------------------------------|---------------|--------------------------|-----------|---------------------|------------|------------|---------|----------|------------|-------------|--------|--------------|
|             |       | 4 GMC PICKUP                                                 |               | GMC                      |           | 4 GMC PICKUP        |            |            |         |          |            |             |        |              |
| DATE        | TIME  | SITE ADDRESS                                                 | TICKET NUMBER | PROMPT INFO              | TRAN CODE | ODOM.               | PROD UNITS | COST/UNIT  | FUEL \$ | OTHER \$ | EXEMPT TAX | REBATE CODE | NET \$ | REPORTED TAX |
| 06-19       | 09:02 | PREVIOUS ODOMETER<br>24 Blakeslee Boulevard Dr E, Lehigh, PA | 00062050      |                          | OP        | 8,064               | 26,390     | 3.838      | 101.27  |          |            |             | 86.08  | -4.83        |
|             |       | PERIOD TOTALS                                                |               |                          |           | 203                 | 26,390     |            | 101.27  |          |            |             | 86.08  | -4.83        |
|             |       | YTD TOTALS                                                   |               |                          |           | 248,730             | 248,730    |            | 839.87  |          |            |             | 691.61 | -47.33       |
|             |       | PERIOD AVG: DPU, PPU, CPD                                    |               |                          |           | 7.70                |            | 3.839      | 0.50    |          |            |             |        |              |
|             |       | 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.

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| CARD NUMBER |                                                                 | CARD EMBOSSING | VEHICLE/ASSET IDENTIFIER |           | VEHICLE DESCRIPTION  |            | PLATE (ST) |         | VIN      |            |             |        |              |
|-------------|-----------------------------------------------------------------|----------------|--------------------------|-----------|----------------------|------------|------------|---------|----------|------------|-------------|--------|--------------|
|             |                                                                 | 2 VAN          | 2V VAN                   |           | VAN-2                |            |            |         |          |            |             |        |              |
| DATE TIME   | SITE ADDRESS                                                    | TICKET NUMBER  | PROMPT INFO              | TRAN CODE | ODOM.                | PROD UNITS | COST/UNIT  | FUEL \$ | OTHER \$ | EXEMPT TAX | REBATE CODE | NET \$ | REPORTED TAX |
| 06-08 12:19 | PREVIOUS ODOMETER<br>24 Blakeslee Boulevard Dr E, Lehighton, PA | 00041469       |                          | OP        | 35,688<br>35,781 UNL | 6,781      | 4,139      | 28.07   |          |            | -3.91       | 24.16  | -1.24        |
|             | PERIOD TOTALS                                                   |                |                          |           | 73                   | 6,781      |            | 28.07   |          |            | -3.91       | 24.16  | -1.24        |
|             | YTD TOTALS                                                      |                |                          |           | *****                | 98,010     |            | 389.79  |          |            | -56.45      | 333.34 | -17.93       |
|             | PERIOD AVGS: DPU, PPU, OPD                                      |                |                          |           | 10.77                |            | 4.140      | 0.38    |          |            |             |        |              |
|             | YTD AVG: JPU                                                    |                |                          |           | *****                |            |            | *****   |          |            |             |        |              |

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

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# Purchase Activity Report

| MEMBER |       | CARD EMBOSSED                             |               | VEHICLE/ASSET IDENTIFIER |           | VEHICLE DESCRIPTION |            | PLATE (ST) |         | VIN      |            |             |        |              |
|--------|-------|-------------------------------------------|---------------|--------------------------|-----------|---------------------|------------|------------|---------|----------|------------|-------------|--------|--------------|
|        |       | 1VAN                                      |               | 1V VAN                   |           | 1 VAN               |            | (PA)       |         |          |            |             |        |              |
| DATE   | TIME  | SITE ADDRESS                              | TICKET NUMBER | PROMPT INFO              | TRAN CODE | ODOM                | PROD UNITS | COST/ UNIT | FUEL \$ | OTHER \$ | EXEMPT TAX | REBATE CODE | NET \$ | REPORTED TAX |
| 05-31  | 14:38 | PREVIOUS ODOMETER                         | 00033890      |                          | OP        | 42,894              | 16,604     | 4,248      | 70.55   |          |            | -9.56       | 60.99  | -3.04        |
| 06-27  | 18:16 | 24 Blakeslee Boulevard Dr E, Leighton, PA | 00060223      |                          | OP        | 43,115 UNL          | 13,541     | 3,699      | 50.09   |          |            | -7.80       | 42.29  | -2.48        |
|        |       | YTD TOTALS                                |               |                          |           | 414                 | 30,145     |            | 120.64  |          |            | -17.36      | 103.28 | -5.52        |
|        |       | PERIOD TOTALS                             |               |                          |           | 1,661               | 123,010    |            | 449.37  |          |            | -70.85      | 378.52 | -22.52       |
|        |       | PERIOD AVGS: DPU, PPU, CPD                |               |                          |           | 13.73               |            | 4.002      | 0.29    |          |            |             |        |              |
|        |       | YTD AVGS: DPU, PPU, CPD                   |               |                          |           | 13.50               |            |            | 0.27    |          |            |             |        |              |

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# Purchase Activity Report - Codes Legend

| TRANSACTION CODES:                     |  | FEE CODES:                             |
|----------------------------------------|--|----------------------------------------|
| AD = Adjustment                        |  | CCF = Currency Conversion Fee          |
| CL = Cardlock                          |  | EVE = Electric Vehicle Fee             |
| CP = Contract Pricing                  |  | PSF = Private Site Fee                 |
| EN = Enhanced Merchant Network         |  | TSE = Truck Stop Fee                   |
| IP = Indoor Payment Terminal           |  | CBF = Cash Back Fee                    |
| MF = Mobile Fueling                    |  | ONF = Out of Network Fee               |
| MN = Manual                            |  | FSTX = Sales tax on EV Transaction Fee |
| OP = Outdoor Payment Terminal          |  |                                        |
| PS = Private Site                      |  |                                        |
| TP = Transponder                       |  |                                        |
| TR = Transaction Reversal              |  |                                        |
| <div>PAID</div> <div>JUL 10 2026</div> |  |                                        |

Please note not all codes will be applicable for your account.



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Lehigh Area School District  
JUN-01-2026 TO JUN-30-2026

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# Financial Summary

ACCOUNT NUMBER: FLEET NAME: Lehigh Area School District

| DEPARTMENT     | DESCRIPTION                                                           | UNITS                             | COST OR FEE                       | TOTAL FEES                     | FUEL \$                           | OTHER \$                     | EXEMPTED TAX                      | NET \$                            | TOTAL FEES & PURCHASES |
|----------------|-----------------------------------------------------------------------|-----------------------------------|-----------------------------------|--------------------------------|-----------------------------------|------------------------------|-----------------------------------|-----------------------------------|------------------------|
| ACCOUNT TOTALS | Regular Diesel #2<br>Unleaded Regular<br>Rebate<br>Paper Delivery Fee | 39.33<br>310.28<br>349.62<br>1.00 | 4.798<br>3.951<br>0.010<br>10.000 | 0.00<br>0.00<br>-3.50<br>10.00 | 188.74<br>1222.76<br>0.00<br>0.00 | 0.00<br>0.00<br>0.00<br>0.00 | -29.14<br>-178.73<br>0.00<br>0.00 | 159.60<br>1044.05<br>0.00<br>0.00 |                        |
|                | PERIOD                                                                |                                   |                                   | 6.50                           | 1411.52                           | 0.00                         | -207.87                           | 1203.65                           |                        |
|                | YTD                                                                   |                                   |                                   | 0.00                           | 6471.30                           | 0.00                         | -1016.59                          | 5454.71                           | 1210.15                |

|                                                 |         |
|-------------------------------------------------|---------|
| ACCOUNTS RECEIVABLE SUMMARY - Invoice 113450104 |         |
| PREVIOUS BALANCE                                | 880.36  |
| PAYMENTS                                        | -880.36 |
| PURCHASES                                       | 1203.65 |
| DEBITS                                          | 10.00   |
| CREDITS                                         | 0.00    |
| ExxonMobil Rebate                               | -3.50   |
| PRIVATE SITE ANCILLARIES                        | 0.00    |
| AMOUNT DUE                                      | 1210.15 |

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# Site Summary

|                |                             |
|----------------|-----------------------------|
| ACCOUNT NUMBER | FLEET NAME                  |
| 389-662-894-4  | Lehigh Area School District |

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| BRAND         | ADDRESS                                  | NO. TRANS | FUEL UNITS | FUEL \$ | OTHER \$ | EXEMPT TAX | NET \$  |
|---------------|------------------------------------------|-----------|------------|---------|----------|------------|---------|
| ExxonMobil    | 24 Blakeslee Boulevard, Lehigh, PA 18235 | 11        | 349.617    | 1411.52 | 0.00     | -207.87    | 1203.65 |
| PERIOD TOTALS |                                          | 11        | 349.617    | 1411.52 | 0.00     | -207.87    | 1203.65 |

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