Vendor: EDM-EDM Financial LLC
8 Kirkbride Lane DOYLESTOWN PA 18901

Pymt # 0010029731
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
JUNE26INVOICE158	07/05/2026		15707.53	10-2511-330-000-00-000-000-000-0000	CONSULTING BUSINESS MANAGER-JU
	Payment Amount:		**15707.53**		*** Accrued A/P**

Vendor: EDM-EDM Financial LLC
8 Kirkbride Lane DOYLESTOWN PA 18901

Pymt # 0010029731
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
JUNE26INVOICE158	07/05/2026		15707.53	10-2511-330-000-00-000-000-000-0000	CONSULTING BUSINESS MANAGER-JU
	Payment Amount:		**15707.53**		*** Accrued A/P**

0010029731

07/27/2026

*****************15,707.53**

PAY Fifteen Thousand Seven Hundred Seven and 53/100 Dollars

To the Order of:

EDM Financial LLC
8 Kirkbride Lane
DOYLESTOWN PA 18901

NON-NEGOTIABLE

[redacted]

AP

From **EDM Financial**
Remit Payment to: EDM 8 Kirkbride Ln
Doylestown, PA 18901
mlentz@edm-finance.com

Invoice ID	**JUNE26INVOICE158**
Issue date	07/05/2026
Due date	07/05/2026 (upon receipt)
Subject	June Business Services

Invoice for **Lehighton School District**
1000 Union St
Lehighton, PA 18235

7/8/26

PAID
JUL 27 2026

Item type	Description	Quantity	Unit price	Amount
Service	[LEH] LEH - 06/01/2026 - Business Management Services: Onsite, Budget, Tax Bills	8.00	$128.75	**$1,030.00**
Service	[LEH] LEH - 06/02/2026 - Business Management Services: Admin Meeting, Homestead Calculation, Update 2028	2.25	$128.75	**$289.69**
Service	[LEH] LEH - 06/02/2026 - Business Management Services	1.25	$128.75	**$160.94**
Service	[LEH] LEH - 06/03/2026 - Business Management Services	3.00	$128.75	**$386.25**
Service	[LEH] LEH - 06/03/2026 - Business Management Services: Meeting with Insurance	1.00	$128.75	**$128.75**
Service	[LEH] LEH - 06/04/2026 - Business Management Services: Tax meeting, budget special ed budget	8.00	$128.75	**$1,030.00**
Service	[LEH] LEH - 06/04/2026 - Business Management Services	2.75	$128.75	**$354.06**
Service	[LEH] LEH - 06/04/2026 - Business Management Services: Meeting w/ [redacted] re MyPath	0.50	$128.75	**$64.38**
Service	[LEH] LEH - 06/05/2026 - Business Management Services: Fedlogic approvals budget	4.50	$128.75	**$579.38**
Service	[LEH] LEH - 06/05/2026 - Business Management Services: Review IU Spec Ed Cost spreadsheet - total cost	0.25	$128.75	**$32.19**
Service	[LEH] LEH - 06/08/2026 - Business Management Services: Onsite, Board Meeting, Budget Taxes	12.75	$128.75	**$1,641.56**
Service	[LEH] LEH - 06/08/2026 - Business Management Services: Meet with [redacted] - accounting functions	0.50	$128.75	**$64.38**
Service	[LEH] LEH - 06/09/2026 - Business Management Services	1.50	$128.75	**$193.13**
Service	[LEH] LEH - 06/09/2026 - Business Management Services: Preliminary DCED Filing, Negotiations	2.50	$128.75	**$321.88**
Service	[LEH] LEH - 06/10/2026 - Business Management Services	0.75	$128.75	**$96.56**

Service	[LEH] LEH - 06/10/2026 - Business Management Services: Mainstream invoice, Staff Budget support, Data	3.00	$128.75	**$386.25**
Service	[LEH] LEH - 06/11/2026 - Business Management Services: Tuition, Budget	0.75	$128.75	**$96.56**
Service	[LEH] LEH - 06/11/2026 - Business Management Services: On-site	7.75	$128.75	**$997.81**
Service	[LEH] LEH - 06/12/2026 - Business Management Services: Post budget payroll to FIS	4.25	$128.75	**$547.19**
Service	[LEH] LEH - 06/15/2026 - Business Management Services: On-site	7.75	$128.75	**$997.81**
Service	[LEH] LEH - 06/16/2026 - Business Management Services	3.25	$128.75	**$418.44**
Service	[LEH] LEH - 06/17/2026 - Business Management Services	3.50	$128.75	**$450.63**
Service	[LEH] LEH - 06/18/2026 - Business Management Services: Onsite, review benefits, finalized PSE 2028	8.00	$128.75	**$1,030.00**
Service	[LEH] LEH - 06/19/2026 - Business Management Services: Budget	4.75	$128.75	**$611.56**
Service	[LEH] LEH - 06/22/2026 - Business Management Services: Review HSA/Act 93/Approve Invoices	2.00	$128.75	**$257.50**
Service	[LEH] LEH - 06/22/2026 - Business Management Services: Board Meeting/Budget	3.75	$128.75	**$482.81**
Service	[LEH] LEH - 06/23/2026 - Business Management Services: Board Meeting	2.00	$128.75	**$257.50**
Service	[LEH] LEH - 06/23/2026 - Business Management Services	0.75	$128.75	**$96.56**
Service	[LEH] LEH - 06/24/2026 - Business Management Services: Budget review, letter finalization for insurance, tax bills	1.75	$128.75	**$225.31**
Service	[LEH] LEH - 06/24/2026 - Business Management Services: Phone meeting with R. Lentz	0.25	$128.75	**$32.19**
Service	[LEH] LEH - 06/25/2026 - Business Management Services: Payroll Review, benefit review	1.25	$128.75	**$160.94**
Service	[LEH] LEH - 06/25/2026 - Business Management Services	8.00	$128.75	**$1,030.00**
Service	[LEH] LEH - 06/26/2026 - Business Management Services: Budget timeline	2.25	$128.75	**$289.69**
Service	[LEH] LEH - 06/29/2026 - Business Management Services	7.50	$128.75	**$965.63**

PAID

JUL 27 2026

Amount due $15,707.53

Vendor: EHRLICH-Ehrlich
PO Box 740608 CINCINNATI OH 45274-0608

Pymt # 0010029732
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
99276961	07/08/2026		95.44	10-2620-460-000-00-100-000-026-0000	EXTERMINATION-JULY-ADMIN
	Payment Amount:		**95.44**		

Vendor: EHRLICH-Ehrlich
PO Box 740608 CINCINNATI OH 45274-0608

Pymt # 0010029732
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
99276961	07/08/2026		95.44	10-2620-460-000-00-100-000-026-0000	EXTERMINATION-JULY-ADMIN
	Payment Amount:		**95.44**		

0010029732

07/27/2026

**********95.44

PAY Ninety-Five and 44/100 Dollars

To the Order of:

Ehrlich
PO Box 740608
CINCINNATI OH 45274-0608

NON-NEGOTIABLE

[redacted]

1000 Union St
Lehighton, PA 18235-1700

$95.44

Bill To number:
[redacted]

Invoice date:
7/8/2026

Invoice

Thank you for trusting EHRLICH to protect your business. A summary of your services is listed below along with the total amount due. Pay by phone by calling 570-622-3760

PAID
JUL 27 2026

INVOICE DETAILS

PEST CONTROL MAINTENANCE LEHIGHTON AREA SCHOOL DISTRICT 1000 UNION ST LEHIGHTON , PA ON 7/8/2026	DISTRICT ADMINISTRATION	92.17
Environmental, Health and Safety Surcharge LEHIGHTON AREA SCHOOL DISTRICT 1000 UNION ST LEHIGHTON , PA ON 7/8/2026	DISTRICT ADMINISTRATION	3.27

SUBTOTAL: $95.44

TOTAL DUE: $95.44

10-2620-460-000-00-100-000-026

7-21-26

Vendor: GIANT FOO-Giant Food Store
Ahold Delhaize USA PO Box 198169 ATLANTA GA 30384

Pymt # 0010029733
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
174402	06/25/2026		163.71	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174405	06/25/2026		958.07	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174406	06/25/2026		173.84	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174409	06/29/2026		62.20	10-1801-635-217-10-200-000-000-0000	PRE-K -SNACKS
174410	06/29/2026		4.08	10-1801-610-000-10-200-000-000-0000	PRE-K -SUPPLIES
174488	07/15/2026		17.48	10-2260-635-000-00-000-000-060-0000	SNACKS
174626	06/03/2026		106.69	10-1110-610-000-20-500-000-050-0000	CONSUMER SCIENCE CLASSROOM
174678	06/08/2026		34.93	10-1110-610-000-20-500-000-050-0000	MAP GROWTH
174682	06/09/2026		45.66	10-1110-610-000-20-500-000-050-0000	CONSUMER SCIENCE CLASSROOM
174683	06/11/2026		31.98	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174689	06/16/2026		117.84	10-2360-635-000-00-000-000-070-0000	SUPERINTENDENT MEALS
174690	06/16/2026		343.65	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174691	06/17/2026		56.68	10-2360-635-000-00-000-000-070-0000	SUPERINTENDENT MEALS
174693	06/16/2026		588.43	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
	Payment Amount:		**2705.24**		*** Accrued A/P**

Vendor: GIANT FOO-Giant Food Store
Ahold Delhaize USA PO Box 198169 ATLANTA GA 30384

Pymt # 0010029733
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
174402	06/25/2026		163.71	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174405	06/25/2026		958.07	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174406	06/25/2026		173.84	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174409	06/29/2026		62.20	10-1801-635-217-10-200-000-000-0000	PRE-K -SNACKS
174410	06/29/2026		4.08	10-1801-610-000-10-200-000-000-0000	PRE-K -SUPPLIES
174488	07/15/2026		17.48	10-2260-635-000-00-000-000-060-0000	SNACKS
174626	06/03/2026		106.69	10-1110-610-000-20-500-000-050-0000	CONSUMER SCIENCE CLASSROOM
174678	06/08/2026		34.93	10-1110-610-000-20-500-000-050-0000	MAP GROWTH
174682	06/09/2026		45.66	10-1110-610-000-20-500-000-050-0000	CONSUMER SCIENCE CLASSROOM
174683	06/11/2026		31.98	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174689	06/16/2026		117.84	10-2360-635-000-00-000-000-070-0000	SUPERINTENDENT MEALS
174690	06/16/2026		343.65	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
174691	06/17/2026		56.68	10-2360-635-000-00-000-000-070-0000	SUPERINTENDENT MEALS
174693	06/16/2026		588.43	10-1110-630-000-00-000-000-000-0012	BACK PACK BUDDIES
	Payment Amount:		**2705.24**		*** Accrued A/P**

0010029733

07/27/2026

******************2,705.24**

PAY Two Thousand Seven Hundred Five and 24/100 Dollars

To the Order of:

Giant Food Store
Ahold Delhaize USA
PO Box 198169
ATLANTA GA 30384

NON-NEGOTIABLE

[redacted]

GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

Store #6320 06/25/26 09:32am

GROCERY

MOTT FRTSNK 40C	8.49 F
PF GF CHDR 20CT	11.99 F
CHZIT ORGMULTIPK	11.69 F
PCONR 15CT 9.37Z	12.99 F
CHZIT ORGMULTIPK	11.69 F
PCONR 15CT 9.37Z	12.99 F
CHZIT ORGMULTIPK	11.69 F
CHZIT ORGMULTIPK	11.69 F
NP VEG STKS 6CT	4.99 F
PCONR 15CT 9.37Z	12.99 F
PCONR 15CT 9.37Z	12.99 F
NP VEG STKS 6CT	4.99 F
NP VEG STKS 6CT	4.99 F
NP VEG STKS 6CT	4.99 F
NP VEG STKS 6CT	4.99 F
NP VEG STKS 6CT	4.99 F
NP VEG STKS 6CT	4.99 F
NP VEG STKS 6CT	4.99 F
NP VEG STKS 6CT	4.99 F
TAX	0.00
TAX EXEMPTION	0.00
**** BALANCE	163.71

****
Payment Type: ACCT RECEIV
Account: [redacted]
Payment Amt: $163.71
06/25/26 09:34am
****

PAID
JUL 27 2026

ACCT RECEIV	163.71
CHANGE	0.00
TOTAL NUMBER OF ITEMS SOLD =	19

AX EXEMPT ID: **********5503

06/25/26 09:35am 6320 15 37 177
www.GiantFoodStores.com
Thank you, take care
Rob Miller, Store Manager
Debra, Your Cashier

You could have saved $0.60
Sign up at the Service Center for a BonusCard and start saving.

How was your visit?
Take our survey to help us improve.
Within 6 days please visit:
www.talktogiant.com
Use the PIN # below to start:
0625 0935 6372 0015 0037
Tambien disponible en espanol

CHARGE SALES INVOICE

ahold delhaize USA

№ 174402

Please pay from this invoice.
TERMS : NET 10 DAYS

copy

USA, Inc.

34-8169

Customer
Account No. 222865

TaxExempt# 76-13550-3

D

P.O. No.

(City) (State) 18235 (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
Karpoff		
cc Karpoff		
	TOTAL	163.71

Form #467
Revised 10/02/25

Pink – Remittance / Customer Copy

02 6/29/26

ENTERED

DUPLICATE RECEIPT*

GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

Store #6320 06/25/26 11:29am

GENERAL MERCHANDISE

ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T
ERTHWSE REUSE BG	0.99 T

GROCERY

LPT CAS CRM CHIX	2.59 F
LPT VEG SP/DP MX	2.59 F
RING NOODLE SOUP	2.59 F
[illegible]	[illegible]
SKIPPY NTL PB 6Z	2.79 F
SKIPPY NTL PB 6Z	2.79 F
SKIPPY NTL PB 6Z	2.79 F
SKIPPY PBTR 6Z	2.79 F
SKIPPY PBTR 6Z	2.79 F
SKIPPY PBTR 6Z	2.79 F
PRICE YOU PAY	2.00
MRCHN NDL BEEF	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
NISSIN 18Z	3.19 F
NISSIN 18Z	3.19 F
MRCHN NDL BEEF	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
NISSIN 18Z	3.19 F
MARUCHAN RS CH	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
MRCHN NDL BEEF	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
MARUCHAN RS CH	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
MARUCHAN RS CH	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
MRCHN NDL BEEF	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
MRCHN NDL BEEF	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
MRCHN RAMEN 18Z	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
MARUCHAN RS CH	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00
MRCHN RAMEN 18Z	2.79 F
BONUS BUY SAVINGS	**0.79-F**
PRICE YOU PAY	2.00

TAX	0.72
TAX EXEMPTION	0.72-
****BALANCE	958.07

****
Payment Type: ACCT RECEIV
Account: [redacted]
Payment Amt: $958.07
06/25/26 11:41am
****

ACCT RECEIV	958.07
CHANGE	[illegible]

CHARGE SALES INVOICE

ahold delhaize USA

No. 174405

Please pay from this invoice.
TERMS : NET 10 DAYS

Copy

SA, Inc.

4-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

P.O. No.

Lehighton (City) Pa (State) 18235 (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
eries		958.07
[redacted]		
	TOTAL	958.07

PAID

JUL 27 2026

Copy

Pink – Remittance / Customer Copy

Form #467
Revised 10/02/25

C2 6/29/26

PAID

JUL 7 2026

al $1,295.62

approve original invoices with their signature.

GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

Store #6320 06/25/26 12:09pm

HEALTH AND BEAUTY CARE		
LDSP INVD SHWRFR		2.79 T
BONUS BUY SAVINGS		0.29-T
PRICE YOU PAY	2.50	
LSS PWDR FRESH		1.79 T
LDSP INVD SHWRFR		2.79 T
BONUS BUY SAVINGS		0.29-T
PRICE YOU PAY	2.50	
LDSP INVD SHWRFR		2.79 T
BONUS BUY SAVINGS		0.29-T
PRICE YOU PAY	2.50	
LSPDSTK SHOWER		1.79 T
[illegible]		2.79 T
BONUS BUY SAVINGS		0.29-T
PRICE YOU PAY	2.50	
LDSP INVD SHWRFR		2.79 T
BONUS BUY SAVINGS		0.29-T
PRICE YOU PAY	2.50	
LDSP INVD SHWRFR		2.79 T
BONUS BUY SAVINGS		0.29-T
PRICE YOU PAY	2.50	
LSPDSTK SHOWER		1.79 T
[illegible]		[illegible]
SC PC PEA RI BW 15		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
SC ORG SHEA BW12Z		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
SC ORG SHEA BW12Z		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
SC OCN FRSH BW12Z		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
C ORG SHEA BW12Z		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
C OCN FRSH BW12Z		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
CHRY BLSSM BW12Z		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
PC PEA RI BW 15		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
COCA SHEA BW12Z		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
COCA SHEA BW12Z		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
COCA SHEA BW12Z		1.25 T
HEALTH/BEAUTY WYB5		0.25-T
PRICE YOU PAY	1.00	
CHRY BLSSM BW12Z		1.25 T
CHRY BLSSM BW12Z		1.25 T
POM PEAC BW12Z		1.25 T
[illegible]		T
TAX		6.30
TAX EXEMPTION		6.30-
*** BALANCE		73.84

****
Paid [illegible] CREDIT
Amt: [redacted]
ent Amt: $73.84
5/26 12:13pm
****

ACCT RECEIV 73.84

CHARGE SALES INVOICE

ahold delhaize USA

NO. 174406

Please pay from this invoice.
TERMS : NET 10 DAYS

e copy

USA, Inc.

384-8169

Customer Account No. [redacted]

TaxExempt# [illegible]

P.O. No.

[illegible] (City) PA 18235 (State) (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
[redacted]		
TOTAL		180.14 - 6.30

PAID

JUL 27 2026

e Copy – Remittance / Customer Copy

Form #467
Revised 10/02/25

6/25/26 173.84

PAID
JUL 27 2026

ENTERED

GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

Store #6320 06/29/26 09:54am

GROCERY

STFR ANMLCRK MP	6.49 F
STFR ANMLCRK MP	6.49 F
STFR ANMLCRK MP	6.49 F
PLSBRY MINI CCHP	6.19 F
PLSBRY MINI CCHP	6.19 F
PLSBRY MINI CCHP	6.19 F
PLSBRY MINI CCHP	6.19 F
PURELIFE 24P	5.99 F
PURELIFE 24P	5.99 F
PURELIFE 24P	5.99 F
TAX	0.00
TAX EXEMPTION	0.00
**** BALANCE	62.20

Natalie Lewitte

****

Payment Type: ACCT RECEIV
Account: [redacted]
Payment Amt: $62.20
06/29/26 09:56am

****

PAID
JUL 27 2026

ACCT RECEIV	62.20
CHANGE	0.00

TOTAL NUMBER OF ITEMS SOLD = 10

TAX EXEMPT ID: **********6503

06/29/26 09:56am 6320 16 38 177

2026 CARD SAVINGS

CHARGE SALES INVOICE

ahold delhaize USA

AP

174469

Please pay from this invoice.
TERMS : NET 10 DAYS

opy

SA, Inc.

4-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

P.O. No. _____

(City) (State) (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
	TOTAL	62.20

ENTERED

Form #467
Revised 10/02/25

Copy Pink – Remittance / Customer Copy

GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

PAID
JUL 27 2026

Store #6320 06/29/26 10:12am

GROCERY

SB EDY NPKN260C	1.99 T
GV FLX STW NEON	2.09 T
TAX	0.24
TAX EXEMPTION	0.24-
**** BALANCE	4.08

Natalie Lewitte

****

Payment Type: ACCT RECEIV
Account: [redacted]
Payment Amt: $4.08
06/29/26 10:14am

****

ACCT RECEIV	4.08
CHANGE	0.00

TOTAL NUMBER OF ITEMS SOLD = 2

TAX EXEMPT ID: **********5503

06/29/26 10:14am 6320 15 46 177

2026 CARD SAVINGS
$318.50

CHARGE SALES INVOICE

ahold delhaize USA

174410

Please pay from this invoice.
TERMS : NET 10 DAYS

SA, Inc.

4-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

P.O. No. _____

(City) (State) (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
[redacted]		
	TOTAL	4.08

Form #467
Revised 10/02/25

e Copy Pink – Remittance / Customer Copy

GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

Store #6320 07/15/26 12:21PM

GROCERY

HSY CHOC BAR	7.99 F
GRAHAM PS 28.8Z	7.49 F
KRAFT JTPF 12Z	2.69 F
BONUS BUY SAVINGS	0.59-F
PRICE YOU PAY	2.00
TAX	0.00
TAX EXEMPTION	0.00
**** BALANCE	17.48

****
Payment Type: ACCT RECEIV
Account: [redacted]
Payment Amt: $17.48
07/15/26 12:23PM
****

ACCT RECEIV	17.48
CHANGE	0.00
TOTAL NUMBER OF ITEMS SOLD =	3

********** SAVINGS SUMMARY **********
Card Savings: 0.59
Your Total Savings: 0.59

TAX EXEMPT ID: **********5503

07/15/26 12:23pm 6320 16 68 103

2026 CARD SAVINGS PA
$319.09

JUL 2 7 2026

****

*****CHOICE REWARDS *****
Earned this visit 17
Current Total 2394
$2.30/GAL Available
or
$23.00 Grocery Dollars
Points expiring on
07/31 - 2377
100 Points = $1.00 Grocery Dollar
100 Points = $0.10/gallon discount
Some restrictions apply.
Gas savings limited to 1 vehicle
per purchase up to 25 gallons.
Visit our website for more details.

****

Customer 4******1079
www.GiantFoodStores.com
Thank you, take care
Rob Miller, Store Manager
Liz, Your Cashier

How was your visit?
Take our survey to help us improve.
Within 5 days please visit:
www.talktogiant.com
Use the PIN # below to start:
0715 1223 6372 0016 0068

CHARGE SALES INVOICE

ahold delhaize USA

No. 174488

Please pay from this invoice.
TERMS : NET 10 DAYS

copy

USA, Inc.

ENTERED

384-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

School District

P.O. No.

Lehighton (City) PA (State) 18235 (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
[redacted]		
	TOTAL	17 48

re Copy

Pink – Remittance / Customer Copy

Form #467
Revised 10/02/25

ID

7/17/26

*DUPLICATE RECEIPT**DUPLICATE RECEIPT*

GIANT

.....1241.BLAKESLEE.BOULEVARD
.....LEHIGHTON,.PA.18235
...Store.Telephone:..(570).386-4146

Store.#6320.....06/03/26.....06:35pm

BAKERY.-.COMMERCIAL
.....SL.CLSSC.100%.WH.....4.69.F
.....BONUS.BUY.SAVINGS.....1.90-F
...PRICE.YOU.PAY.....2.79
.....NAT.OWN.WHOLE.WH.....4.69.F
.....BONUS.BUY.SAVINGS.....4.69-F
...PRICE.YOU.PAY.....FREE
.....NAT.OWN.WHOLE.WH.....4.69.F
DAIRY
.....SB.YW.AMRCN.IWS.....2.79.F
.....OJ.PLUS.VIT.D.....3.99.F
.....OJ.PLUS.VIT.D.....3.99.F
.....OJ.PLUS.VIT.D.....3.99.F
.....SB.WHOLE.MILK.....NP....2.63.F
.....LRG.WHITE.EGGS.....3.77.F
.....LRG.WHITE.EGGS.....3.77.F
.....LRG.WHITE.EGGS.....3.77.F
.....LRG.WHITE.EGGS.....3.77.F
.....LRG.WHITE.EGGS.....3.77.F
.....SB.SL.MED.CHED.....1.69.F
FROZEN.FOOD
.....SB.BROC.12Z.....1.29.F
.....SB.HSH.BRWN.PTY.....3.99.F
.....BONUS.BUY.SAVINGS.....0.99-F
...PRICE.YOU.PAY.....3.00
.....BNQ.B&S.BF.LINK.....2.19.F
.1.@.3/5.00
.....BQ.ORG.SAUS.PATT.....1.67.F
GROCERY
.....MIS.FJT.TORTLLA.....3.29.F
.....MIS.FJT.TORTLLA.....3.29.F
.....GV.HD.FORK.100C.....3.69.F
.....GV.TRNSL.CUP100C.....3.99.F
MEAT
.....SB.FC.BACON.2.1Z.....3.99.F
.....SB.FC.BACON.2.1Z.....3.99.F
.....SB.FC.BACON.2.1Z.....3.99.F
.....HTFLD.GRND.SSG.....4.89.F
.....HTFLD.HAM.STKS.....2.99.F
PRODUCE
.....+SB.DCD.GRN.PPR8.....1.37.F
.....1LB.STRAWBERRY.....4.99.F
SC.....B1G1.$1.BERRIES.....3.99-F
...PRICE.YOU.PAY.....1.00
.....1LB.STRAWBERRY.....4.99.F
.6.@.2/3.00
.....+HASS.AVOCADOS.....9.00.F
.6.@.0.17
.....BONUS.BUY.SAVINGS.....1.02-F
...PRICE.YOU.PAY.FOR...6...7.98
.....BAG.LEMONS.2LBS.....3.49.F
.2.19.lb.@.0.67./lb
WT.....FRESH.BANANAS.....1.25.F

.....SAVNGS.FS.NO.TX.....0.86-F
.....TAX.....0.47
.....TAX.EXEMPTION.....0.47-
...****.BALANCE.....106.69

****
Payment.Type:.ACCT.RECEIV
Account:.[redacted]
Payment.Amt:.$106.69
06/03/26..06:44pm
****

.....ACCT.RECEIV.....106.69
.....CHANGE.....0.00
TOTAL.NUMBER.OF.ITEMS.SOLD.=....38

*********..SAVINGS.SUMMARY..**********
Card.Savings:.....13.35

CHARGE SALES INVOICE

ahold delhaize USA

No. 174626

Please pay from this invoice.
TERMS : NET 10 DAYS

copy

USA, Inc.

ENTERED

84-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

ddle School

P.O. No. 600000573

Lehighton (City) PA (State) 18235 (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
[redacted]		
	TOTAL	106.69

Copy

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Form #467
Revised 10/02/25

PAID
JUL 27 2026

l Total	$152.35				

should still approve original invoices with their signature.

for students who had MAP ~~Growth~~

GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

Store #6320 06/08/26 10:25am

GROCERY

POP ICEASTFB 5LB		5.29 F
BONUS BUY SAVINGS		0.30-F
PRICE YOU PAY	4.99	
POP ICEASTFB 5LB		5.29 F
BONUS BUY SAVINGS		0.30-F
PRICE YOU PAY	4.99	
POP ICEASTFB 5LB		5.29 F
BONUS BUY SAVINGS		0.30-F
PRICE YOU PAY	4.99	
POP ICEASTFB 5LB		5.29 F
BONUS BUY SAVINGS		0.30-F
PRICE YOU PAY	4.99	
POP ICEASTFB 5LB		5.29 F
BONUS BUY SAVINGS		0.30-F
PRICE YOU PAY	4.99	
POP ICEASTFB 5LB		5.29 F
BONUS BUY SAVINGS		0.30-F
PRICE YOU PAY	4.99	
POP ICEASTFB 5LB		5.29 F
BONUS BUY SAVINGS		0.30-F
PRICE YOU PAY	4.99	
TAX		0.00
TAX EXEMPTION		0.00
**** BALANCE		34.93

****
Payment Type: ACCT RECEIV
Account: [redacted]
Payment Amt: $34.93
06/08/26 10:26am
****

ACCT RECEIV 34.93
CHANGE 0.00
TOTAL NUMBER OF ITEMS SOLD = 7

********* SAVINGS SUMMARY **********
Card Savings: 2.10

M. [signature] 6/15/26

PAID JUL 27 2026

CHARGE SALES INVOICE

ahold delhaize USA

No. 174678

Please pay from this invoice.
TERMS : NET 10 DAYS

opy

SA, Inc.

4-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

District

P.O. No.

Lehighton PA 18235
(City) (State) (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
[redacted]		
	TOTAL	34.93

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Revised 10/02/25

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Pink – Remittance / Customer Copy

GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

Store #6320 06/09/26 04:47pm

GROCERY
LJ BLUCRN 10.1Z 5.79 F
BONUS BUY SAVINGS 0.80-F
PRICE YOU PAY 4.99
SB WH GOLD CORN 0.75 F
SG W/K WHITE CRN 0.99 F
SB SSND BLK BNS 0.89 F
SB SLC PEACH JC 1.29 F

PRODUCE
BAG LEMONS 2LBS 3.49 F
+CILANTRO 0.99 F
1.82 lb @ 1.29 /lb
WT RED CABBAGE 2.35 F
+SB DCD TMATES 8 2.49 F
+SB DCD GRN PPR8 2.75 F
SB LIME BAG 5.29 F
0.19 lb @ 1.79 /lb
WT JALAPENO PEPPER 0.34 F
SB LETTUCE 8Z 1.79 F
CARROTS MTCHSTK 2.29 F
2 @ 2.00
+HASS AVOCADOS 3.00 F
MANGO SALSA 8OZ 4.49 F
DICED RED ONION 2.99 F
MILD PICO SL16Z 4.49 F

TAX 0.00
**** BALANCE 45.66

****
Payment Type: ACCT RECEIV
Account: [redacted]
Payment Amt: $45.66
06/09/26 04:49pm
****

ACCT RECEIV 45.66
CHANGE 0.00
TOTAL NUMBER OF ITEMS SOLD = 20

PAID
JUL 27 2026

CHARGE SALES INVOICE

ahold delhaize USA

No. 174682

Please pay from this invoice.
TERMS : NET 10 DAYS

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SA, Inc.

4-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

Middle School P.O. No. 0000005573

AD Lehighton PA 18235
(City) (State) (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
Miller		
	TOTAL	45.66

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GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

Store #6320 06/11/26 08:44am

GROCERY

NAB CLSS MX MLTP	11.99 F
MRTN 36CT VARPK	19.99 F
TAX	0.00
TAX EXEMPTION	0.00
**** BALANCE	31.98

****
Payment Type: ACCT RECEIV
Account: [redacted]
Payment Amt: $31.98
06/11/26 08:45am
****

ACCT RECEIV	31.98
CHANGE	0.00

TOTAL NUMBER OF ITEMS SOLD = 2

TAX EXEMPT ID: **********5503

06/11/26 08:45am 6320 15 23 177
www.GiantFoodStores.com
Thank you, take care
Rob Miller, Store Manager
Debra, Your Cashier

You could have saved $3.00
Sign up at the Service Center for a BonusCard and start saving.

How was your visit?
Take our survey to help us improve.
Within 6 days please visit:
www.talktogiant.com
Use the PIN # below to start:
0611 0845 6342 0015 0023
Tambien disponible en espanol

CHARGE SALES INVOICE

ahold delhaize USA

No. 174683

Please pay from this invoice.
TERMS : NET 10 DAYS

opy

SA, Inc.

4-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

P.O. No.

(City) (State) (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
[redacted]		
	TOTAL	31.98

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PAID
JUL 27 2026

tal $31.98

Building/department administrator should still approve original invoices with their signature.

*DUPLICATE RECEIPT**DUPLICATE RECEIPT*

GIANT

.....1241.BLAKESLEE.BOULEVARD
.....LEHIGHTON,.PA.18235
...Store.Telephone:..(570).386-4146

Store.#6320.....06/16/26.....10:06am

BAKE.SHOP
.....4.BLBYCBLR.MFNS.....5.99.F
.....4.BLBYCBLR.MFNS.....5.99.F
.....4.BLBYCBLR.MFNS.....5.99.F
.....CHOC.CHIP.MUFFIN.....5.99.F
.....CHOC.CHIP.MUFFIN.....5.99.F
.....CHOC.CHIP.MUFFIN.....5.99.F
DAIRY
.....SB.HALF.HALF.CRM..NP....2.19.F
.....IN.DEL.FR.VANILA.....4.29.F
GROCERY
.....CLSS.MX.18C.18Z.....12.99.F
.....BONUS.BUY.SAVINGS.....1.00-F
...PRICE.YOU.PAY.....11.99
.....COKE.ZERO.12PK.....10.99.B
.....BONUS.BUY.SAVINGS.....10.99-B
...PRICE.YOU.PAY.....FREE
.....DIET.COKE.12PK.....10.99.B
.....PRLEAF.TEA.6P.....8.99.F
.....BONUS.BUY.SAVINGS.....1.30-F
...PRICE.YOU.PAY.....7.69
.....SPRITE.12P.12Z.C.....10.99.B
.....QKR.CHWY.BAR.VP.....5.99.F
.....QKR.CHWY.BAR.VP.....5.99.F
.....DEERPK.WTR.24PK.....6.79.F
.....SB.BFST.BLND.KC.....14.99.F

.....TAX.....1.32
.....TAX.EXEMPTION.....1.32-
...****.BALANCE.....117.84

****
Payment.Type:.ACCT.RECEIV
Account:.[redacted]
Payment.Amt:.$117.84
06/16/26..10:08am
****

.....ACCT.RECEIV.....117.84
.....CHANGE.....0.00
TOTAL.NUMBER.OF.ITEMS.SOLD.=....17

PA
JUL 27

CHARGE SALES INVOICE

ahold delhaize USA

AP

No. 174689

Please pay from this invoice.
TERMS : NET 10 DAYS

copy

USA, Inc. 7/2/26

84-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

P.O. No.

(City) (State) (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
cories		117.84
[redacted]		
	TOTAL	117.84

Copy

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Form #467
Revised 10/02/25

ID

2026

	Grand Total	$117.84			

Building/department administrator should still approve original invoices with their signature.

*DUPLICATE RECEIPT**DUPLICATE RECEIPT*

GIANT

.....1241.BLAKESLEE.BOULEVARD
.....LEHIGHTON,.PA.18235
...Store.Telephone:..(570).386-4146

Store.#6320.....06/16/26.....10:09am

DAIRY
.....SB.RF.SCHS.20Z.....6.99.F
.....SB.RF.SCHS.20Z.....6.99.F
.....SB.RF.SCHS.20Z.....6.99.F
.....SB.RF.SCHS.20Z.....6.99.F
.....SB.RF.SCHS.20Z.....6.99.F
.....SB.STGCHS.24OZ.....6.99.F
.....SB.RF.SCHS.20Z.....6.99.F
.....SB.STGCHS.24OZ.....6.99.F
.....GGRT.BRY.CHR.4OZ.....7.69.F
.....GGRT.BRY.CHR.4OZ.....7.69.F
.....GGRT.CC.STRW4OZ.....7.69.F
.....GGRT.CC.STRW4OZ.....7.69.F
.....GGRT.CC.STRW4OZ.....7.69.F
.....GGRT.BRY.CHR.4OZ.....7.69.F
GROCERY
.....MRTN.PCORN.7Z.....8.49.F
.....BONUS.BUY.SAVINGS.....0.50-F
...PRICE.YOU.PAY.....7.99
.....MRTN.PCORN.7Z.....8.49.F
.....BONUS.BUY.SAVINGS.....0.50-F
...PRICE.YOU.PAY.....7.99
.....TORST.CHURTZ.8Z.....5.29.F
.....PF.GF.24CT.MP.....11.99.F
.....BONUS.BUY.SAVINGS.....0.60-F
...PRICE.YOU.PAY.....11.39
.....CHZT.CLSC.MX.20C.....11.59.F
.....CHZT.CLSC.MX.20C.....11.59.F
.....PF.GF.VAR.PK.20C.....11.99.F
.....BONUS.BUY.SAVINGS.....0.60-F
...PRICE.YOU.PAY.....11.39
.....SOH.PRTZL.STKS.....12.29.F
.....BONUS.BUY.SAVINGS.....0.80-F
...PRICE.YOU.PAY.....11.49
.....SOH.PRTZL.STKS.....12.29.F
.....BONUS.BUY.SAVINGS.....0.80-F
...PRICE.YOU.PAY.....11.49
.....SOH.PRTZL.STKS.....12.29.F
.....BONUS.BUY.SAVINGS.....0.80-F
...PRICE.YOU.PAY.....11.49
.....SOH.PRTZL.STKS.....12.29.F
.....BONUS.BUY.SAVINGS.....0.80-F
...PRICE.YOU.PAY.....11.49

SC.....$5.OFF.NABISCO.....5.00-
SC.....$5.OFF.NABISCO.....5.00-
.....TAX.....0.00
.....TAX.EXEMPTION.....0.00
...****.BALANCE.....343.65

****
Payment.Type:.ACCT.RECEIV
Account:[redacted]
Payment.Amt:.$343.65
06/16/26..10:12am
****

.....ACCT.RECEIV.....343.65
.....CHANGE.....0.00
TOTAL.NUMBER.OF.ITEMS.SOLD.=....52

*********..SAVINGS.SUMMARY..**********
Card.Savings:.....40.23
Your.Total.Savings:.....40.23

TAX.EXEMPT.ID:.*******.****.**5503

06/16/26.10:12am.6320.16.29.196

2026.CARD.SAVINGS
.... $174.[illegible]

CHARGE SALES INVOICE

ahold delhaize USA

No 174690

Please pay from this invoice.
TERMS : NET 10 DAYS

opy

SA, Inc.

4-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

District P.O. No.

Lehighton (City) PA (State) 18235 (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
ITEMS		343.65
[redacted]		
	TOTAL	343.65

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PAID
JUL 27 2026

ENTERED

GIANT

1241 BLAKESLEE BOULEVARD
LEHIGHTON, PA 18235
Store Telephone: (570) 386-4146

Store #6320 06/17/26 11:19am

BAKE SHOP	
CHOC CHIP BKT	6.00 F
PREPARED FOODS	
PARTY TRAY	42.99 B
SB SALAD PASTA 4	7.69 F
TAX	2.58
TAX EXEMPTION	2.58-
**** BALANCE	56.68

****
Payment Type: ACCT RECEIV
Account: [redacted]
Payment Amt: $56.68
06/17/26 11:22am
****

ACCT RECEIV	56.68
CHANGE	0.00
TOTAL NUMBER OF ITEMS SOLD =	3

TAX EXEMPT ID: **********5603

06/17/26 11:22am 6320 15 53 185

2026 CARD SAVINGS $273.82

****

*****CHOICE REWARDS *****
Earned this visit 57
Current Total 1269
$1.20/GAL Available
or
$12.00 Grocery Dollars
Points expiring on
06/30 = 80
100 Points = $1.00 Grocery Dollar
100 Points = $0.10/gallon discount
Some restrictions apply.
Gas savings limited to 1 vehicle
per purchase up to 25 gallons.
Visit our website for more details.

****

Customer 4******1079
www.GiantFoodStores.com
Thank you, take care
Rob Miller, Store Manager
Tanya, Your Cashier

How was your visit?
Take our survey to help us improve.
Within 5 days please visit:
www.talktogiant.com
Use the PIN # below to start:
0617 1122 6372 0015 0053
Tambien disponible en espanol

PA
JUL 2

CHARGE SALES INVOICE

ahold delhaize USA

AP

No. 174691

Please pay from this invoice.
TERMS : NET 10 DAYS

copy

USA, Inc.

84-8169

7/2/26

Customer Account No. [redacted]

TaxExempt# [redacted]

P.O. No.

lehighton (City) Pa (State) 18235 (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
	ENTERED	
[redacted]		
	TOTAL	56.68

Form #467
Revised 10/02/25

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ember
ore

Scan to order

10 Am

Phone # [redacted]

Rev. 1/26

*DUPLICATE RECEIPT**DUPLICATE RECEIPT*

GIANT

.......1241.BLAKESLEE.BOULEVARD
.........LEHIGHTON,.PA.18235
...Store.Telephone:.(570).386-4146

Store.#6320......06/16/26......10:49am

GROCERY
........POP.ICEASTFB.6LB........5.29.F
........**BONUS.BUY.SAVINGS.......0.30-F**
...PRICE.YOU.PAY...........4.99
........POP.ICEASTFB.6LB........5.29.F
........**BONUS.BUY.SAVINGS.......0.30-F**
...PRICE.YOU.PAY...........4.99
........POP.ICEASTFB.6LB........5.29.F
........**BONUS.BUY.SAVINGS.......0.30-F**
...PRICE.YOU.PAY...........4.99
........POP.ICEASTFB.6LB........5.29.F
...PRICE.YOU.PAY...........5.00
........QKR.CHWY.VP.30C.........9.49.F
........QKR.CHWY.VP.30C.........9.49.F
........QKR.CHWY.VP.30C.........9.49.F
........QKR.CHWY.VP.30C.........9.49.F
........TOAST.CHEE14.1Z.........5.29.F
........TOAST.CHEE14.1Z.........5.29.F
........**BONUS.BUY.SAVINGS.......5.29-F**
...PRICE.YOU.PAY...........FREE
........TOAST.CHEE14.1Z.........5.29.F
........TOAST.CHEE14.1Z.........5.29.F
........**BONUS.BUY.SAVINGS.......5.29-F**
...PRICE.YOU.PAY...........FREE
........TOAST.CHEE14.1Z.........5.29.F
........TOAST.CHEE14.1Z.........5.29.F
........**BONUS.BUY.SAVINGS.......5.29-F**
...PRICE.YOU.PAY...........FREE
........TOAST.CHEE14.1Z.........5.29.F
........TOAST.CHEE14.1Z.........5.29.F
........**BONUS.BUY.SAVINGS.......5.29-F**
...PRICE.YOU.PAY...........FREE
........TOAST.CHDR12.5Z.........5.29.F
........TOAST.CHDR12.5Z.........5.29.F
........**BONUS.BUY.SAVINGS.......5.29-F**
...PRICE.YOU.PAY...........FREE
........TOAST.CHDR12.5Z.........5.29.F
........TOAST.CHDR12.5Z.........5.29.F
........**BONUS.BUY.SAVINGS.......5.29-F**
...PRICE.YOU.PAY...........FREE
........TOAST.CHDR12.5Z.........5.29.F
........TOAST.CHDR12.5Z.........5.29.F
........**BONUS.BUY.SAVINGS.......5.29-F**
...PRICE.YOU.PAY...........FREE
........TOAST.CHDR12.5Z.........5.29.F
........SUNCHIPS.MX.18Z........12.99.F
........**BONUS.BUY.SAVINGS.......1.00-F**
...PRICE.YOU.PAY...........11.99
........SUNCHIPS.MX.18Z........12.99.F
........**BONUS.BUY.SAVINGS.......1.00-F**
...PRICE.YOU.PAY...........11.99
........SUNCHIPS.MX.18Z........12.99.F
........**BONUS.BUY.SAVINGS.......1.00-F**
...PRICE.YOU.PAY...........11.99
........GFSH.SAY.CHS18.8.......11.99.F
........**BONUS.BUY.SAVINGS.......0.60-F**
...PRICE.YOU.PAY...........11.39
........GFSH.SAY.CHS18.8.......11.99.F
........**BONUS.BUY.SAVINGS.......0.60-F**
...PRICE.YOU.PAY...........11.39
........GFSH.SAY.CHS18.8.......11.99.F
........**BONUS.BUY.SAVINGS.......0.60-F**
...PRICE.YOU.PAY...........11.39
........PF.GF.SAVORY.MP........11.99.F
........**BONUS.BUY.SAVINGS.......0.60-F**
...PRICE.YOU.PAY...........11.39
........PF.GF.VAR.PK.20C.......11.99.F
........**BONUS.BUY.SAVINGS.......0.60-F**
...PRICE.YOU.PAY...........11.39

........TAX.......................0.00
........TAX.EXEMPTION.............0.00
...****.BALANCE.................588.43

****

CHARGE SALES INVOICE

ahold delhaize USA

No. 174693

Please pay from this invoice.
TERMS : NET 10 DAYS

AP

copy

SA, Inc.

4-8169

Customer Account No. [redacted]

TaxExempt# [redacted]

Shield

P.O. No.

Lehighton PA 18235
(City) (State) (Zip Code)

ITEM	UNIT PRICE	TOTAL PRICE
ercs		588.43
[redacted]		
	TOTAL	588.43

py Pink – Remittance / Customer Copy

Form #467
Revised 10/02/25

PAID
JUL 2 7 2026

ENTERED

al $932.08

uld still approve original invoices with their signature.

Vendor: [redacted]

Pymt # 0010029734
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
MILEAGE REIM	03/30/2026		105.02	10-2834-580-000-00-000-000-065-0000	DATA SUMMIT
MILEAGE REIM	05/26/2026		244.90	10-1801-580-217-10-200-000-000-0000	PRE-K CONFERENCE
	Payment Amount:		**349.92**		*** Accrued A/P**

Vendor: [redacted]

Pymt # 0010029734
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
MILEAGE REIM	03/30/2026		105.02	10-2834-580-000-00-000-000-065-0000	DATA SUMMIT
MILEAGE REIM	05/26/2026		244.90	10-1801-580-217-10-200-000-000-0000	PRE-K CONFERENCE
	Payment Amount:		**349.92**		*** Accrued A/P**

0010029734

07/27/2026

********************349.92**

PAY Three Hundred Forty-Nine and 92/100 Dollars

To the Order of:

[redacted]

NON-NEGOTIABLE

[redacted]

AP

EXPENSE FORM

Lehighton Area School District

[redacted]

Name:
Email:
Employee ID:
Vendor #: N/A

Department: Superintendent
Request Date: 3/30/2026
PO Number: N/A
Deliver To Vendor #: N/A
Routing Info: Administration

ENTERED

EXPENSE SUMMARY

Total Miles	156.7600	Description
Mileage Expenses	$105.02	Travel to and from Data Summit
Expenses	$0.00	
Req. Amount	$105.02	

10-2831-5560- 000-00-000-000-065-0000

MILEAGE DETAILS

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
3/30/2026	78.38	$52.51	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Hershey Lodge, 325 University Dr, Hershey, PA 17033, USA	Travel to and from Data Summit	00-0000-000-000-00-000-000-000-0000
4/1/2026	78.38	$52.51	$0.00	Hershey Lodge, 325 University Dr, Hershey, PA 17033, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Travel to and from Data Summit (Round Trip)	00-0000-000-000-00-000-000-000-0000

PAID
JUL 27 2026

AP

EXPENSE FORM

Lehighton Area School District

Name: [redacted]
Email:
Employee ID:
Vendor #: N/A

Department: Superintendent
Request Date: 5/26/2026
PO Number: N/A
Deliver To Vendor #: N/A
Routing Info: Regular

EXPENSE SUMMARY

Total Miles	365.5200	Description
Mileage Expenses	$244.90	Pre-K Conference in Altoona, PA
Expenses	$0.00	
Req. Amount	$244.90	

10-1801-580-217-10-200-000-000-0000

MILEAGE DETAILS

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
5/26/2026	182.76	$122.45	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	1 Convention Center Dr, Altoona, PA 16602, USA	Pre-K Conference	00-0000-000-000-00-000-000-000-0000
5/28/2026	182.76	$122.45	$0.00	1 Convention Center Dr, Altoona, PA 16602, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Pre-K Conference (Round Trip)	00-0000-000-000-00-000-000-000-0000

PAID
JUL 27 2026

Vendor: HILLSID01-Hillside Small Engine
4088 Long Run Road LEHIGHTON PA 18235

Pymt # 0010029735
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
13476-R	06/11/2026		73.35	10-2620-610-000-00-130-000-026-0000	SHIELD PULLEY
	Payment Amount:		**73.35**		*** Accrued A/P**

Vendor: HILLSID01-Hillside Small Engine
4088 Long Run Road LEHIGHTON PA 18235

Pymt # 0010029735
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
13476-R	06/11/2026		73.35	10-2620-610-000-00-130-000-026-0000	SHIELD PULLEY
	Payment Amount:		**73.35**		*** Accrued A/P**

0010029735

07/27/2026

**********73.35

PAY Seventy-Three and 35/100 Dollars

To the Order of:

Hillside Small Engine
4088 Long Run Road
LEHIGHTON PA 18235

NON-NEGOTIABLE

[redacted]

ap

HILLSIDE SMALL ENGINE LLC

4088 LONG RUN ROAD
LEHIGHTON PA 18235

Invoice

Date	Invoice #
6/11/2026	13476-R

Bill To
LEHIGHTON SCHOOL DISTRICT 1000 UNION STREET LEHIGHTON PA 18235 610-377-4490 JUSTIN: 484-226-4084

NEW EXTENDED HOURS!

TUE & THURS: 8AM-7PM
WED & FRI: 8AM-5PM
SAT: 8AM-2PM
SUN & MON: CLOSED

PAID
JUL 27 2026

Due Date	P.O. No.	Terms	Project
6/11/2026		Due on receipt	

Item	Description	Qty	Price	Amount
5101103SM	SHIELD, PULLEY	1	10.76	10.76
84012673	PULLEY	1	62.59	62.59

10-2620-610-000 00-730-000-026

7-9-26

[redacted]

Subtotal	$73.35
Sales Tax (0.0%)	$0.00
Total	$73.35
Payments/Credits	$0.00
Balance Due	$73.35

PAYMENT IS DUE UPON RECEIPT

A $30 FEE WILL BE ADDED FOR ALL RETURNED CHECKS

UNITS NOT PICKED UP WITHIN 30 DAYS OF NOTIFICATION OF REPAIR WILL BE CHARGED $5/DAY STORAGE. 2% INTEREST WILL BE ADDED TO ALL ACCOUNTS OVER 30 DAYS

20% HANDLING CHARGE ON ALL RETURNS. NO RETURNS AFTER 15 DAYS.

NO RETURNS ON ELECTRICAL ITEMS, BELTS OR SPECIAL ORDERS

M Justin 6/11

Vendor: [redacted]

Pymt # 0010029736
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
LAVA	06/24/2026		150.00	10-2818-538-000-00-000-028-000-0000	LAVA REIM JAN-MAY 26
	Payment Amount:		**150.00**		*** Accrued A/P**

Vendor: [redacted]

Pymt # 0010029736
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
LAVA	06/24/2026		150.00	10-2818-538-000-00-000-028-000-0000	LAVA REIM JAN-MAY 26
	Payment Amount:		**150.00**		*** Accrued A/P**

0010029736

07/27/2026

**********150.00

PAY One Hundred Fifty and 00/100 Dollars

To the Order of:

[redacted]

NON-NEGOTIABLE

[redacted]

LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST

DATE: 6/24/2026

PAID
JUL 27 2026

AMOUNT: $150.00

REQUEST A CHECK FROM 10 **FUND PAYABLE TO:**

[redacted]

REASON: LAVA Internet Reimbursement for Student [redacted] Jan/May

SIGNATURE OF REQUESTOR: [redacted]

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

ACCOUNT CODE(S): 10-2818-538-000-00-000-028-000-0000

DEBIT:

EJ 6/29/26

Lehighton Area School District—LAVA Internet Reimbursement Form

Students participating in Lehighton Area Virtual Academy (LAVA) **FULL-TIME** are eligible to receive reimbursement of $30 per month, per household, during active enrollment within LAVA.

PAID
JUL 27 2026

Reimbursement checks will be mailed out on a bi-annual basis in February and July. Reimbursement will only be given for the months in which the student(s) is enrolled and proof of internet service billing is provided with the parent/guardian name on the account. A bill must be submitted for **EACH** month. Parents/Guardians are responsible for submitting copies of their monthly internet bills, each semester, to the LASD Administration Office or acitro@lehighton.org.

The first reimbursement will include the months of September, October, November and December. In order to receive reimbursement, the appropriate form and bills must be received no later than **JANUARY 15**.

The second reimbursement will include January, February, March, April and May. In order to receive reimbursement, the appropriate form and bills must be received no later than **JUNE 30**.

The below form will need to be completed and submitted with the statements. Checks will only be made out to the parent/guardian's name on the internet statement/bill.

Email *

[redacted]

Semester *

- ○ First Semester
- ◉ Second Semester

Student Full Name *

[redacted]

PAID
JUL 27 2026

*

Check Made Payable to:

(name of the parent/guardian on the internet bill)

[redacted]

Address, City, St Zip *

[redacted]

Electronic Signature (First & Last Name) *

[redacted]

Please upload all internet service billing for the semester. *

IMG_0025 - [redacted] IMG_0026 - [redacted] IMG_0027 [redacted].. IMG_0028 - [redacted]

Add file

This form was created outside of your domain.

Google Forms

PAID
JUL 27 2026

Vendor: INTERST01-Interstate Tax Service Inc
P O BOX 1490 MECHANICSBURG PA 17055-1490

Pymt # 0010029737
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
36600	07/01/2026		319.80	10-2513-310-000-00-000-000-090-0000	UNEMPLOYMENT COMPENSATION JUL-
		Payment Amount:	**319.80**		

Vendor: INTERST01-Interstate Tax Service Inc
P O BOX 1490 MECHANICSBURG PA 17055-1490

Pymt # 0010029737
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
36600	07/01/2026		319.80	10-2513-310-000-00-000-000-090-0000	UNEMPLOYMENT COMPENSATION JUL-
		Payment Amount:	**319.80**		

0010029737

07/27/2026

********************319.80**

PAY Three Hundred Nineteen and 80/100 Dollars

To the Order of:

Interstate Tax Service Inc
P O BOX 1490
MECHANICSBURG PA 17055-1490

NON-NEGOTIABLE

[redacted]

INTERSTATE TAX SERVICE, INC.

Unemployment Compensation Consultants, Analysts and Specialists – Since 1943

Geoffrey D. Moomaw, President
Dominic D'Agostino
Ned A. Hoffmeister, Jr.

July 01, 2026
Inv#:36600

MR. ED RARICK, BUSINESS MANAGER
LEHIGHTON AREA SCHOOL DISTRICT
1000 UNION ST
LEHIGHTON PA 18235

Unemployment Compensation Cost Control Services for July, August, September, 2026.

Quarterly Fee:	PAID JUL 27 2026	$319.80
Total (DUE NOW!):		**$319.80**

Invoice due upon receipt.

Return this portion with your payment

LEHIGHTON AREA SCHOOL DISTRICT [redacted]
Date of Invoice: July 01, 2026
Invoice No: 36600
Total Due: $319.80

Amount Paid: 319.80

Check/Ref#: _____

Interstate Tax Service, Inc.
P.O. Box 1490 • Mechanicsburg, PA 17055 • (800) 382-1395 • (717) 795-8851 • (717) 795-8839 (fax)
office@interstatetaxserviceinc.com

Vendor: [redacted]

Pymt # 0010029738
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
LAVA	06/24/2026		150.00	10-2818-538-000-00-000-028-000-0000	LAVA REIM JAN-MAY 26
	Payment Amount:		**150.00**		*** Accrued A/P**

Vendor: [redacted]

Pymt # 0010029738
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
LAVA	06/24/2026		150.00	10-2818-538-000-00-000-028-000-0000	LAVA REIM JAN-MAY 26
	Payment Amount:		**150.00**		*** Accrued A/P**

0010029738

07/27/2026

**********150.00

PAY One Hundred Fifty and 00/100 Dollars

To the Order of:

[redacted]

NON-NEGOTIABLE

[redacted]

LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST

DATE: 6/24/2026

PAID

AMOUNT: $150.00

JUL 27 2026

REQUEST A CHECK FROM 10 FUND PAYABLE TO:

[redacted]

REASON: LAVA Internet Reimbursement for Student [redacted] Jan/May

SIGNATURE OF REQUESTOR: [redacted]

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

ACCOUNT CODE(S): 10-2818-538-000-00-000-028-000-0000

DEBIT:

l2 6/29/26

Lehighton Area School District—LAVA Internet Reimbursement Form

Students participating in Lehighton Area Virtual Academy (LAVA) **FULL-TIME** are eligible to receive reimbursement of $30 per month, per household, during active enrollment within LAVA.

Reimbursement checks will be mailed out on a bi-annual basis in February and July. Reimbursement will only be given for the months in which the student(s) is enrolled and proof of internet service billing is provided with the parent/guardian name on the account. A bill must be submitted for **EACH** month. Parents/Guardians are responsible for submitting copies of their monthly internet bills, each semester, to the LASD Administration Office or acitro@lehighton.org.

PAID
JUL 27 2026

The first reimbursement will include the months of September, October, November and December. In order to receive reimbursement, the appropriate form and bills must be received no later than **JANUARY 15**.

The second reimbursement will include January, February, March, April and May. In order to receive reimbursement, the appropriate form and bills must be received no later than **JUNE 30**.

The below form will need to be completed and submitted with the statements. Checks will only be made out to the parent/guardian's name on the internet statement/bill.

Email *

[redacted]

Semester *

- ○ First Semester
- ◉ Second Semester

Student Full Name *

[redacted]

*

Check Made Payable to:

(name of the parent/guardian on the internet bill)

[redacted]

PAID
JUL 27 2026

Address, City, St Zip *

[redacted]

Electronic Signature (First & Last Name) *

[redacted]

Please upload all internet service billing for the semester. *

DynamicPDF666...
DynamicPDF 555...
DynamicPDF444...
DynamicPDF 333...
DynamicPDF 222...

Add file

PAID
JUL 27 2026

Vendor: [redacted]

Pymt # 0010029739
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
LAVA	06/24/2026		150.00	10-2818-538-000-00-000-028-000-0000	LAVA REIM JAN-MAY 26
	Payment Amount:		**150.00**		*** Accrued A/P**

Vendor: [redacted]

Pymt # 0010029739
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
LAVA	06/24/2026		150.00	10-2818-538-000-00-000-028-000-0000	LAVA REIM JAN-MAY 26
	Payment Amount:		**150.00**		*** Accrued A/P**

0010029739

07/27/2026

**********150.00

PAY One Hundred Fifty and 00/100 Dollars

To the Order of:

[redacted]

NON-NEGOTIABLE

[redacted]

LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST

DATE: 6/24/2026

AMOUNT: $150.00

REQUEST A CHECK FROM 10 **FUND PAYABLE TO:**

[redacted]

PAID
JUL 27 2026

REASON: LAVA Internet Reimbursement for Student [redacted] Jan/May

SIGNATURE OF REQUESTOR: [redacted]

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

ACCOUNT CODE(S): 10-2818-538-000-00-000-028-000-0000

DEBIT:

6/25/26

Lehighton Area School District
Lehighton Area Virtual Academy
Internet Reimbursement Form

PAID

JUL 27 2026

Students participating in Lehighton Area Virtual Academy (LAVA) **FULL-TIME** are eligible to receive reimbursement of $30 per month, per household, during active enrollment within LAVA.

Reimbursement checks will be mailed out on a bi-annual basis in February and July. Reimbursement will only be given for the months in which the student(s) is enrolled and proof of internet service billing is provided with the parent/guardian name on the account. A bill must be submitted for **EACH** month. Parents/Guardians are responsible for submitting copies of their monthly internet bills, each semester. Checks will only be made out to the parent/guardian's name on the internet statement/bill.

The first reimbursement will include the months of September, October, November and December. In order to receive reimbursement, the appropriate form and bills must be received no later than **JANUARY 15**. The second reimbursement will include January, February, March, April and May. In order to receive reimbursement, the appropriate form and bills must be received no later than **JUNE 30**.

Option 1: **MAIL** all required documents (including this form) to the LASD Administration Office:
c/o Mrs. Amanda Citro, Confidential Secretary to the Assistant to the Superintendent
1000 Union Street, Lehighton, PA 18235

☐ Semester 1 Request	☑ Semester 2 Request
Student Name:	[redacted]
Check Made Payable to: (name of the parent/guardian on the internet bill)	
Address:	
City, State, Zip:	
Signature:	
Please attach all applicable monthly internet bills to this form	

Option 2: **COMPLETE THE ONLINE LASD—LAVA INTERNET REIMBURSEMENT FORM:**
https://forms.gle/hZjYvW2F31DiWyiz9 and upload all statements in the area provided.

Thank you!

Vendor: [redacted]

Pymt # 0010029740
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
LAVA	06/24/2026		150.00	10-2818-538-000-00-000-028-000-0000	LAVA REIM JAN-MAY 26
	Payment Amount:		**150.00**		*** Accrued A/P**

Vendor: [redacted]

Pymt # 0010029740
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
LAVA	06/24/2026		150.00	10-2818-538-000-00-000-028-000-0000	LAVA REIM JAN-MAY 26
	Payment Amount:		**150.00**		*** Accrued A/P**

0010029740

07/27/2026

**********150.00

PAY One Hundred Fifty and 00/100 Dollars

To the Order of:

[redacted]

NON-NEGOTIABLE

[redacted]

LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST

DATE: 6/25/2026

AMOUNT: $150.00

REQUEST A CHECK FROM 10 FUND PAYABLE TO:

[redacted]

PAID
JUL 27 2026

REASON: LAVA Internet Reimbursement for Student [redacted] Jan/May

SIGNATURE OF REQUESTOR: [redacted]

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

ACCOUNT CODE(S): 10-2818-538-000-00-000-028-000-0000

DEBIT:

6/29/26

Lehighton Area School District–LAVA Internet Reimbursement Form

Students participating in Lehighton Area Virtual Academy (LAVA) **FULL-TIME** are eligible to receive reimbursement of $30 per month, per household, during active enrollment within LAVA.

PAID
JUL 27 2026

Reimbursement checks will be mailed out on a bi-annual basis in February and July. Reimbursement will only be given for the months in which the student(s) is enrolled and proof of internet service billing is provided with the parent/guardian name on the account. A bill must be submitted for **EACH** month. Parents/Guardians are responsible for submitting copies of their monthly internet bills, each semester, to the LASD Administration Office or acitro@lehighton.org.

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The second reimbursement will include January, February, March, April and May. In order to receive reimbursement, the appropriate form and bills must be received no later than **JUNE 30**.

The below form will need to be completed and submitted with the statements. Checks will only be made out to the parent/guardian's name on the internet statement/bill.

Email *

[redacted]

Semester *

- ○ First Semester
- ◉ Second Semester

Student Full Name *

[redacted]

PAID
JUL 27 2026

*

Check Made Payable to:

(name of the parent/guardian on the internet bill)

[redacted]

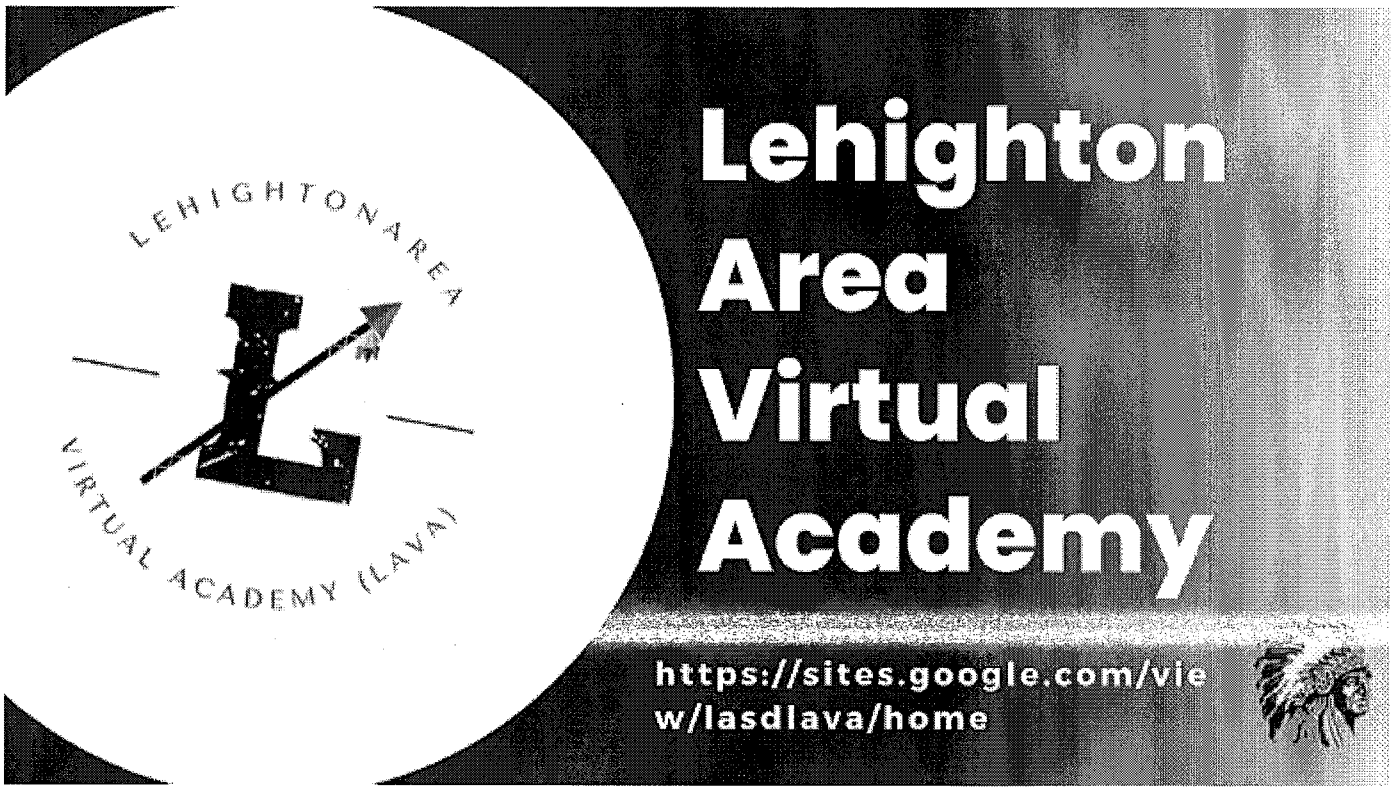
Address, City, St Zip *

[redacted]

Electronic Signature (First & Last Name) *

[redacted]

Please upload all internet service billing for the semester. *



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DynamicPDF - Jo...

Add file

PAID
JUL 27 2026

This form was created outside of your domain.

Google Forms

Vendor: JOSTEN-Jostens Inc.
21336 Network Place CHICAGO IL 60673

Pymt # 0010029741
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
40079337	06/10/2026		19.25	10-2380-610-000-30-800-000-080-0000	DIPLOMA
40106339	06/26/2026		19.25	10-2380-610-000-30-800-000-080-0000	DIPLOMA
	Payment Amount:		**38.50**		*** Accrued A/P**

Vendor: JOSTEN-Jostens Inc.
21336 Network Place CHICAGO IL 60673

Pymt # 0010029741
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
40079337	06/10/2026		19.25	10-2380-610-000-30-800-000-080-0000	DIPLOMA
40106339	06/26/2026		19.25	10-2380-610-000-30-800-000-080-0000	DIPLOMA
	Payment Amount:		**38.50**		*** Accrued A/P**

0010029741

07/27/2026

**********38.50

PAY Thirty-Eight and 50/100 Dollars

To the Order of:

Jostens Inc.
21336 Network Place
CHICAGO IL 60673

NON-NEGOTIABLE

[redacted]

INVOICE

Please Pay From This Invoice

Remit to:
JOSTENS INC.
21336 NETWORK PLACE
CHICAGO IL 60673-1213

Ship To: No: [redacted]
LEHIGHTON AREA HIGH SCHOOL
ONE INDIAN LANE
LEHIGHTON PA 18235-1192

Sold To: No: [redacted]
LEHIGHTON AREA HIGH SCHOOL

Bill To: No: [redacted]
LEHIGHTON AREA SCHOOL DISTRICT
ACCOUNTS PAYABLE
1000 UNION ST
LEHIGHTON PA 18235

Invoice Number	Date	Page
40079337	10-JUN-26	1 of 1

Terms	Order Number
FNET45	52150304

Customer P.O. Number: 0000

Date Shipped	Shipped Via
10-JUN-26	UPS

Shipping Ref Num.: 1Z3106220332202653

Due Date	FOB
25-JUL-26	FOB Shipping Point

Sales Agent: [redacted] Sales ID: 5174

For Customer Service Call
1-800-854-7464

Line No.	Description	Quantity Ordered	To Follow	Quantity Shipped	Unit Price	Extended Price	Total Tax
1	Diploma	1	0	1	5.30	5.30	.00
2	Packaging, Handling & Delivery	1	0	1		13.95	.00

PAID
JUL 27 2026

6/29/26

Y

Total Charges Less Discount +	Total Tax +	Total Deposits -	Please Pay This Amount =
19.25	.00	.00	19.25

Please Detach and Return This Portion With Your Payment. Jostens will never ask you to change a remittance address via email.

Customer P.O. Number	Customer Num.	Invoice No.	Invoice Date	Amount
0000	[redacted]	40079337	10-JUN-26	19.25

Payment: 19.25

Remit to: JOSTENS INC.
21336 NETWORK PLACE
CHICAGO IL 60673-1213

LEHIGHTON AREA SCHOOL DISTRICT
ACCOUNTS PAYABLE
1000 UNION ST
LEHIGHTON PA 18235

jfiix010jfi00313

Jostens®

INVOICE

AP

Please Pay From This Invoice

Remit to:
JOSTENS INC.
21336 NETWORK PLACE
CHICAGO IL 60673-1213

Ship To: No: [redacted]
LEHIGHTON AREA HIGH SCHOOL
ONE INDIAN LANE
LEHIGHTON PA 18235-1192

Sold To: No: [redacted]
LEHIGHTON AREA HIGH SCHOOL

Bill To: No: [redacted]
LEHIGHTON AREA SCHOOL DISTRICT
ACCOUNTS PAYABLE
1000 UNION ST
LEHIGHTON PA 18235

Invoice Number	Date	Page
40106339	26-JUN-26	1 of 1

Terms	Order Number
FNET55	52219217

Customer P.O. Number: 0000

Date Shipped	Shipped Via
26-JUN-26	UPS

Shipping Ref Num.: 1Z3106220332243672

Due Date	FOB
20-AUG-26	FOB Shipping Point

Sales Agent	Sales ID
MARK C. JUDY INC	5174

For Customer Service Call
1-800-854-7464

Line No.	Description	Quantity Ordered	To Follow	Quantity Shipped	Unit Price	Extended Price	Total Tax
1	Diploma	1	0	1	5.30	5.30	.00
2	Packaging, Handling & Delivery	1	0	1		13.95	.00

PAID
JUL 27 2026

Y

Total Charges Less Discount +	Total Tax +	Total Deposits -	Please Pay This Amount =
19.25	.00	.00	19.25

Please Detach and Return This Portion With Your Payment. Jostens will never ask you to change a remittance address via email.

Customer P.O. Number	Customer Num.	Invoice No.	Invoice Date	Amount
0000	[redacted]	40106339	26-JUN-26	19.25

Payment: 19.25

Remit to: JOSTENS INC.
21336 NETWORK PLACE
CHICAGO IL 60673-1213

7/26

LEHIGHTON AREA SCHOOL DISTRICT
ACCOUNTS PAYABLE
1000 UNION ST
LEHIGHTON PA 18235

jfiix010,jfi00313

Vendor: JOSTENMAJ-Jostens C/O [redacted]
263 Magnolia Rd WARMINSTER PA [redacted]

Pymt # 0010029742
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
#2026	06/30/2026		469.00	10-2380-610-000-30-800-000-080-0000	CAP, GOWN, TASSEL UNITS
		Payment Amount:	469.00		* Accrued A/P

Vendor: JOSTENMAJ-Jostens C/O [redacted]
263 Magnolia Rd WARMINSTER PA 18974

Pymt # 0010029742
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
#2026	06/30/2026		469.00	10-2380-610-000-30-800-000-080-0000	CAP, GOWN, TASSEL UNITS
		Payment Amount:	469.00		* Accrued A/P

0010029742

07/27/2026

**********469.00

PAY Four Hundred Sixty-Nine and 00/100 Dollars

To the Order of:

Jostens C/O [redacted]
263 Magnolia Rd
WARMINSTER PA 18974

NON-NEGOTIABLE

[redacted]

AP

INVOICE

INVOICE #2026
DATE: 6/30/2026

[redacted]

TO:
Lehighton Area High School
One Indian Lane
Lehighton, PA 18235
Attn: Susan Howland

SHIP TO:
SAME

PAID
JUL 27 2026

Please make all checks payable to [redacted] and remit to the address above.

SALESPERSON	INVOICE NUMBER	REQUISITIONER	SHIPPED VIA	F.O.B. POINT	TERMS
Mark Judy	2026 – CG Units	Susan Howland			Due on receipt

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
14	Cap, gown, tassel units	$33.50	$469.00
		SUBTOTAL	$469.00
		SALES TAX	exempt
		*SHIPPING & HANDLING	
		TOTAL DUE	$469.00

If you have any questions concerning this quote contact [redacted]

Thank you for your business!

6/24/26

Vendor: [redacted]

Pymt # 0010029743
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
MILEAGE REIM	12/03/2025		191.84	10-3250-580-000-30-800-002-000-0000	COLONIAL MEETING, TOURNAMENT
MILEAGE REIM	02/11/2026		208.36	10-3250-580-000-30-800-002-000-0000	COLONIAL SEMI FINALS, CHAMPION
MILEAGE REIM	04/15/2026		383.32	10-3250-580-000-30-800-002-000-0000	DISTRICT XI MEETING, COLONIAL
	Payment Amount:		**783.52**		*** Accrued A/P**

Vendor: [redacted]

Pymt # 0010029743
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
MILEAGE REIM	12/03/2025		191.84	10-3250-580-000-30-800-002-000-0000	COLONIAL MEETING, TOURNAMENT
MILEAGE REIM	02/11/2026		208.36	10-3250-580-000-30-800-002-000-0000	COLONIAL SEMI FINALS, CHAMPION
MILEAGE REIM	04/15/2026		383.32	10-3250-580-000-30-800-002-000-0000	DISTRICT XI MEETING, COLONIAL
	Payment Amount:		**783.52**		*** Accrued A/P**

0010029743

07/27/2026

**********783.52

PAY Seven Hundred Eighty-Three and 52/100 Dollars

To the Order of:

[redacted]

NON-NEGOTIABLE

[redacted]

AP

EXPENSE FORM

Lehighton Area School District

Name:	[redacted]	**Department:**	Superintendent
Email:		**Request Date:**	4/15/2026
Employee ID:		**PO Number:**	N/A
Vendor #:	N/A	**Deliver To Vendor #:**	N/A

EXPENSE SUMMARY

Total Miles	572.1200	Description
Mileage Expenses	$383.32	Colonial League Athletic Director Meeting
Expenses	$0.00	10-3250-580-000-30800-002
Req. Amount	$383.32	

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JUL 27 2026

MILEAGE DETAILS

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
4/15/2026	38.14	$25.55	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	700 Linden Ave, Hellertown, PA 18055, USA	District XI Spring AD/Principal Meeting	00-0000-000-000-00-000-000-000-0000
4/15/2026	38.14	$25.55	$0.00	700 Linden Ave, Hellertown, PA 18055, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	District XI Spring AD/Principal Meeting (Round Trip)	00-0000-000-000-00-000-000-000-0000
4/16/2026	34.04	$22.81	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	2100 Polk Valley Rd, Hellertown, PA 18055, USA	Colonial League Tennis Championships	00-0000-000-000-00-000-000-000-0000

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
4/16/2026	34.04	$22.81	$0.00	2100 Polk Valley Rd, Hellertown, PA 18055, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Tennis Championships (Round Trip)	00-0000-000-000-00-000-000-000-0000
4/23/2026	28.89	$19.36	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Colonial League Academic All-Star Breakfast	00-0000-000-000-00-000-000-000-0000
4/23/2026	28.89	$19.36	$0.00	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Academic All-Star Breakfast (Round Trip)	00-0000-000-000-00-000-000-000-0000
4/23/2026	27.63	$18.51	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3149 Chester Ave, Bethlehem, PA 18020, USA	District XI Tennis Championships	00-0000-000-000-00-000-000-000-0000
4/23/2026	27.63	$18.51	$0.00	3149 Chester Ave, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	District XI Tennis Championships (Round Trip)	00-0000-000-000-00-000-000-000-0000
5/5/2026	26.21	$17.56	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	1050 Ironpigs Way, Allentown, PA 18109, USA	District XI AD Association Meeting	00-0000-000-000-00-000-000-000-0000

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JUL 27 2026

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
5/5/2026	26.21	$17.56	$0.00	1050 Ironpigs Way, Allentown, PA 18109, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	District XI AD Association Meeting (Round Trip)	00-0000-000-000-00-000-000-000-0000
5/8/2026	34.04	$22.81	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	2100 Polk Valley Rd, Hellertown, PA 18055, USA	Colonial League Baseball Tournament	00-0000-000-000-00-000-000-000-0000
5/8/2026	34.04	$22.81	$0.00	2100 Polk Valley Rd, Hellertown, PA 18055, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Baseball Tournament (Round Trip)	00-0000-000-000-00-000-000-000-0000
5/11/2026	21.09	$14.13	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	2700 N Cedar Crest Blvd, Allentown, PA 18104, USA	Colonial League Baseball Tournament	00-0000-000-000-00-000-000-000-0000
5/11/2026	21.09	$14.13	$0.00	2700 N Cedar Crest Blvd, Allentown, PA 18104, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Baseball Tournament (Round Trip)	00-0000-000-000-00-000-000-000-0000
5/13/2026	20.08	$13.45	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Whitehall-Coplay School District, PA, USA	District XI Track and Field Championships	00-0000-000-000-00-000-000-000-0000

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JUL 27 2026

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
5/13/2026	20.08	$13.45	$0.00	Whitehall-Coplay School District, PA, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	District XI Track and Field Championships (Round Trip)	00-0000-000-000-00-000-000-000-0000
5/14/2026	21.09	$14.13	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	2700 N Cedar Crest Blvd, Allentown, PA 18104, USA	Colonial League Baseball Tournament	00-0000-000-000-00-000-000-000-0000
5/14/2026	21.09	$14.13	$0.00	2700 N Cedar Crest Blvd, Allentown, PA 18104, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Baseball Tournament (Round Trip)	00-0000-000-000-00-000-000-000-0000
5/20/2026	5.96	$3.99	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Jim Thorpe High School, Jim Thorpe, PA 18229, USA	District XI Baseball Tournament	00-0000-000-000-00-000-000-000-0000
5/20/2026	5.96	$3.99	$0.00	Jim Thorpe High School, Jim Thorpe, PA 18229, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	District XI Baseball Tournament (Round Trip)	00-0000-000-000-00-000-000-000-0000
5/28/2026	28.89	$19.36	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Colonial League Athletic Director Meeting	00-0000-000-000-00-000-000-000-0000

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JUL 27 2026

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
5/28/2026	28.89	$19.36	$0.00	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Athletic Director Meeting (Round Trip)	00-0000-000-000-00-000-000-000-0000

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JUL 27 2026

AP

EXPENSE FORM

Lehighton Area School District

Name: [redacted]
Email:
Employee ID:
Vendor #: N/A

Department: Superintendent
Request Date: 2/11/2026
PO Number: N/A
Deliver To Vendor #: N/A
Routing Info: Athletics

EXPENSE SUMMARY

Total Miles	311.0000	Description
Mileage Expenses	$208.36	PSADA Conference
Expenses	$0.00	10-3250-580-000-30800-002
Req. Amount	$208.36	

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JUL 27 2026

MILEAGE DETAILS

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
2/11/2026	21.84	$14.63	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3800 Mechanicsville Rd, Whitehall Township, PA 18052, USA	Colonial League Girls Basketball Semi-Finals	00-0000-000-000-00-000-000-000-0000
2/11/2026	21.84	$14.63	$0.00	3800 Mechanicsville Rd, Whitehall Township, PA 18052, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Girls Basketball Semi-Finals (Round Trip)	00-0000-000-000-00-000-000-000-0000
2/13/2026	27.64	$18.52	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3149 Chester Ave, Bethlehem, PA 18020, USA	Colonial League Girls Basketball Championships	00-0000-000-000-00-000-000-000-0000

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
2/13/2026	27.64	$18.52	$0.00	3149 Chester Ave, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Girls Basketball Championships (Round Trip)	00-0000-000-000-00-000-000-000-0000
2/21/2026	27.64	$18.52	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3149 Chester Ave, Bethlehem, PA 18020, USA	District XI Wrestling Championships	00-0000-000-000-00-000-000-000-0000
2/21/2026	27.64	$18.52	$0.00	3149 Chester Ave, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	District XI Wrestling Championships (Round Trip)	00-0000-000-000-00-000-000-000-0000
3/18/2026	78.38	$52.51	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	325 University Dr, Hershey, PA 17033, USA	PSADA Conference	00-0000-000-000-00-000-000-000-0000
3/18/2026	78.38	$52.51	$0.00	325 University Dr, Hershey, PA 17033, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	PSADA Conference (Round Trip)	00-0000-000-000-00-000-000-000-0000

AP

EXPENSE FORM

Lehighton Area School District

Name: [redacted]
Email:
Employee ID:
Vendor #: N/A

Department: Superintendent
Request Date: 12/3/2025
PO Number: N/A
Deliver To Vendor #: N/A
Routing Info: Athletics

EXPENSE SUMMARY

Total Miles	286.3200	Description
Mileage Expenses	$191.84	District XI Wrestling Championships
Expenses	$0.00	10-3250-380-000-30800-102
Req. Amount	$191.84	

PAID
JUL 27 2026

MILEAGE DETAILS

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
12/3/2025	28.88	$19.35	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Colonial League Athletic Director Meeting	00-0000-000-000-00-000-000-000-0000
12/3/2025	28.88	$19.35	$0.00	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Athletic Director Meeting (Round Trip)	00-0000-000-000-00-000-000-000-0000
1/22/2026	28.88	$19.35	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Colonial League Athletic Director Meeting	00-0000-000-000-00-000-000-000-0000

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
1/22/2026	28.88	$19.35	$0.00	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Athletic Director Meeting (Round Trip)	00-0000-000-000-00-000-000-000-0000
1/31/2026	27.64	$18.52	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3149 Chester Ave, Bethlehem, PA 18020, USA	District DX Team Duals Tournament	00-0000-000-000-00-000-000-000-0000
1/31/2026	27.64	$18.52	$0.00	3149 Chester Ave, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	District DX Team Duals Tournament (Round Trip)	00-0000-000-000-00-000-000-000-0000
2/24/2026	28.88	$19.35	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Colonial League Athletic Director Meeting	00-0000-000-000-00-000-000-000-0000
2/24/2026	28.88	$19.35	$0.00	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Athletic Director Meeting (Round Trip)	00-0000-000-000-00-000-000-000-0000
3/26/2026	28.88	$19.35	$0.00	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Colonial League Athletic Director Meeting	00-0000-000-000-00-000-000-000-0000

PAID

JUL 27 2026

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
3/26/2026	28.88	$19.35	$0.00	3604 Farmersville Rd, Bethlehem, PA 18020, USA	Lehighton School District, 1000 Union St, Lehighton, PA 18235, USA	Colonial League Athletic Director Meeting (Round Trip)	00-0000-000-000-00-000-000-000-0000

PAID
JUL 27 2026

Vendor: LEARNWEL-LearnWell Services
Department 5420 PO Box 4110 WOBURN MA 01888-4110

Pymt # 0010029744
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
INV284983	12/05/2025		541.16	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV285276	12/05/2025		505.08	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV286276	12/12/2025		144.31	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV291655	01/21/2026		432.93	10-1110-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV307577	03/20/2026		144.31	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV310923	03/31/2026		721.55	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV327011	06/05/2026		288.62	10-1110-568-000-30-800-000-012-0000	HOSPITAL TUTORING
	Payment Amount:		**2777.96**		*** Accrued A/P**

Vendor: LEARNWEL-LearnWell Services
Department 5420 PO Box 4110 WOBURN MA 01888-4110

Pymt # 0010029744
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
INV284983	12/05/2025		541.16	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV285276	12/05/2025		505.08	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV286276	12/12/2025		144.31	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV291655	01/21/2026		432.93	10-1110-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV307577	03/20/2026		144.31	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV310923	03/31/2026		721.55	10-1231-568-000-30-800-000-012-0000	HOSPITAL TUTORING
INV327011	06/05/2026		288.62	10-1110-568-000-30-800-000-012-0000	HOSPITAL TUTORING
	Payment Amount:		**2777.96**		*** Accrued A/P**

0010029744

07/27/2026

*****************2,777.96**

PAY Two Thousand Seven Hundred Seventy-Seven and 96/100 Dollars

To the Order of:

LearnWell Services
Department 5420
PO Box 4110
WOBURN MA 01888-4110

NON-NEGOTIABLE

LearnWell Services

EI US, LLC.

Invoice #: INV284983
Invoice Date: 12/05/2025
Terms: Net 30
Due Date: 01-04-2026

Bill To:

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

PAID
JUL 27 2026

6/22/26 Approved

SE 12 **Student Name:** [redacted]

Memo:

PO Nbr:

Qty		Description	Teacher / Tutor	Rate	Location	Amount
2.66	12/1/25	Hospital Tutoring	[redacted]	$54.25	SLE-Adol-IP	$144.31
2.66	12/3/25	Hospital Tutoring		$54.25	SLE-Adol-IP	$144.31
1.995	12/4/25	Hospital Tutoring		$54.25	SLE-Adol-IP	$108.23
2.66	12/5/25	Hospital Tutoring		$54.25	SLE-Adol-IP	$144.31
					Subtotal	$541.16
					Total	$541.16
					Applied Payments/ Adjustments	$(0.00)
					TOTAL DUE	**$541.16**

10-1231-508-30-800

6/15/26 MW

Please Remit Payment to:
Department 5420, PO Box 4110, Woburn, MA 01888-4110
P: 508-732-9101 f: 508-732-9717
www.learnwelleducation.com

LearnWell Services

EI US, LLC.

Invoice #:	**INV285276**
Invoice Date:	**12/05/2025**
Terms:	**Net 30**
Due Date:	**01-04-2026**

Bill To:

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

6/22/26 AP
Approved

PAID
JUL 27 2026

SE
IP **Student Name:** [redacted]

Memo: Retro

PO Nbr:

Qty		Description	Teacher / Tutor	Rate	Location	Amount
2.66	11/6/25	Retro Hospital Tutoring	[redacted]	$54.25	SLE-Adol-IP	$144.31
2.66	11/7/25	Retro Hospital Tutoring		$54.25	SLE-Adol-IP	$144.31
2.66	11/10/25	Retro Hospital Tutoring		$54.25	SLE-Adol-IP	$144.31
1.33	11/26/25	Retro Hospital Tutoring		$54.25	SLE-Adol-IP	$72.15
					Subtotal	$505.08
					Total	$505.08
					Applied Payments/ Adjustments	$(0.00)
					TOTAL DUE	**$505.08**

10-1231-568-30-800

6/15/26 mw

Please Remit Payment to:
Department 5420, PO Box 4110, Woburn, MA 01888-4110
P: 508-732-9101 f: 508-732-9717
www.learnwelleducation.com

LearnWell Services

EI US, LLC.

Invoice #: **INV286276**
Invoice Date: **12/12/2025**
Terms: **Net 30**
Due Date: **01-11-2026**

Bill To:

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

ap

PAID
JUL 27 2026

Student Name: [redacted]

SE 12

Memo: Approved 6/22/26

PO Nbr:

Qty	Description	Teacher / Tutor	Rate	Location	Amount
2.66	12/8/25 Hospital Tutoring	[redacted]	$54.25	SLE-Adol-IP	$144.31
				Subtotal	$144.31
				Total	$144.31
				Applied Payments/ Adjustments	$(0.00)
				TOTAL DUE	**$144.31**

10-1231-568-30-800

6/15/26 mw

Please Remit Payment to:
Department 5420, PO Box 4110, Woburn, MA 01888-4110
P: 508-732-9101 f: 508-732-9717
www.learnwelleducation.com

LearnWell Services

EI US, LLC.

Invoice #:	**INV291655**
Invoice Date:	**01/21/2026**
Terms:	**Net 30**
Due Date:	**02-20-2026**

Bill To:

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

Approved 6/22/26

Requested Student Transfer Funds from HS

AP

Student Name: [redacted]

Memo: Retro

PO Nbr:

Qty	Description		Teacher / Tutor	Rate	Location	Amount
2.66	11/24/25	Retro Hospital Tutoring	[redacted]	$54.25	GBNE-A-IP	$144.31
2.66	11/25/25	Retro Hospital Tutoring		$54.25	GBNE-A-IP	$144.31
2.66	12/1/25	Retro Hospital Tutoring		$54.25	GBNE-A-IP	$144.31

10-1110-508-30-800

Subtotal	$432.93
Total	$432.93
Applied Payments/ Adjustments	$(0.00)
TOTAL DUE	**$432.93**

PAID
JUL 27 2026

6/15/26 mw

Please Remit Payment to:
Department 5420, PO Box 4110, Woburn, MA 01888-4110
P: 508-732-9101 f: 508-732-9717
www.learnwelleducation.com

LearnWell Services

EI US, LLC.

Invoice #:	**INV307577**
Invoice Date:	**03/20/2026**
Terms:	**Net 30**
Due Date:	**04-19-2026**

Bill To:

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

AP

6/22/26 Approved

SE 12

Student Name: [redacted]

Memo:

PO Nbr:

Qty	Description	Teacher / Tutor	Rate	Location	Amount
2.66	3/20/26 Hospital Tutoring	[redacted]	$54.25	SLE-Adol-IP	$144.31

Subtotal	$144.31
Total	$144.31
Applied Payments/ Adjustments	$(0.00)
TOTAL DUE	**$144.31**

10-1231-568-30-800

PAID
JUL 27 2026

6/15/26 mw

Please Remit Payment to:
Department 5420, PO Box 4110, Woburn, MA 01888-4110
P: 508-732-9101 f: 508-732-9717
www.learnwelleducation.com

EI US, LLC.

LearnWell Services

Invoice #:	INV310923
Invoice Date:	03/31/2026
Terms:	Net 30
Due Date:	04-30-2026

PAID
JUL 27 2026
AP

Bill To:

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

Approved
6/22/26

Student Name: [redacted]

Memo:

PO Nbr:

Qty		Description	Teacher / Tutor	Rate	Location	Amount
2.66	3/23/26	Hospital Tutoring	[redacted]	$54.25	SLE-Adol-IP	$144.31
2.66	3/24/26	Hospital Tutoring		$54.25	SLE-Adol-IP	$144.31
2.66	3/25/26	Hospital Tutoring		$54.25	SLE-Adol-IP	$144.31
2.66	3/26/26	Hospital Tutoring		$54.25	SLE-Adol-IP	$144.31
2.66	3/27/26	Hospital Tutoring		$54.25	SLE-Adol-IP	$144.31

10-1231-568-30-800

Subtotal	$721.55
Total	$721.55
Applied Payments/ Adjustments	$(0.00)
TOTAL DUE	$721.55

6/15/26 mw

Please Remit Payment to:
Department 5420, PO Box 4110, Woburn, MA 01888-4110
P: 508-732-9101 f: 508-732-9717
www.learnwelleducation.com

LearnWell Services

EI US, LLC.

Invoice #: INV327011
Invoice Date: 06/05/2026
Terms: Net 30
Due Date: 07-05-2026

Bill To:

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

Required Student-Transfer funds from HS

AP

6/22/26

Approved

Student Name: [redacted]

Memo: PAID JUL 27 2026

PO Nbr:

Qty		Description	Teacher / Tutor	Rate	Location	Amount
2.66	6/3/26	Hospital Tutoring	[redacted]	$54.25	SLE-Adol-IP	$144.31
2.66	6/4/26	Hospital Tutoring		$54.25	SLE-Adol-IP	$144.31

10-1110-508-30-800

Subtotal	$288.62
Total	$288.62
Applied Payments/ Adjustments	$(0.00)
TOTAL DUE	**$288.62**

MW 6/15/26

Please Remit Payment to:
Department 5420, PO Box 4110, Woburn, MA 01888-4110
P: 508-732-9101 f: 508-732-9717
www.learnwelleducation.com

Vendor: LEHIGHT08-Lehighton Area School District
Food Service 1000 Union St LEHIGHTON PA 18235-0000

Pymt # 0010029745
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
46	06/02/2026		524.01	10-1801-635-217-10-200-000-000-0000	PRE-K GRADUATION
	Payment Amount:		**524.01**		*** Accrued A/P**

Vendor: LEHIGHT08-Lehighton Area School District
Food Service 1000 Union St LEHIGHTON PA 18235-0000

Pymt # 0010029745
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
46	06/02/2026		524.01	10-1801-635-217-10-200-000-000-0000	PRE-K GRADUATION
	Payment Amount:		**524.01**		*** Accrued A/P**

0010029745

07/27/2026

********************524.01**

PAY Five Hundred Twenty-Four and 01/100 Dollars

To the Order of:

Lehighton Area School District
Food Service
1000 Union St
LEHIGHTON PA 18235-0000

NON-NEGOTIABLE

[redacted]

AP

46 Invoice No.

SPECIAL FUNCTION BILLING

ORGANIZATION BILLED	Lehighton Administration
CONTACT PERSON	[redacted]
SPECIAL FUNCTION DESCRIPTION	Pre-K Graduation June 1 and June 2
FUNCTION DATE	6/2/2026
POSTING DATE	6/30/2026
PO NUMBER	

ITEMIZED COSTS			
Food Cost			$432.60
Paper			$45.00
Cleaning			-
Supplies			-
Mileage			-
FSD Costs			-
TNG Labor Excluding Fringe			$39.00
TNG Fringe	19.00%		$7.41
District Labor			-
District Fringe	0.00%		-
Miscellaneous:			-

PAID
JUL 27 2026

Notes:
Cookies, wraps, water, chips and paper products for 2 evenings

AMOUNT DUE $524.01

Natasha Laubach
6/26/26

REMIT PAYMENT TO:
Lehighton Area School District

Vendor: LOSER'S-LOSER'S Music
728 Cumberland St LEBANON PA 17042

Pymt # 0010029746
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
14971	06/04/2026		39.75	10-1110-610-000-30-800-000-080-0000	TRUMPETS LOFTY SOUND
	Payment Amount:		**39.75**		*** Accrued A/P**

Vendor: LOSER'S-LOSER'S Music
728 Cumberland St LEBANON PA 17042

Pymt # 0010029746
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
14971	06/04/2026		39.75	10-1110-610-000-30-800-000-080-0000	TRUMPETS LOFTY SOUND
	Payment Amount:		**39.75**		*** Accrued A/P**

0010029746

07/27/2026

********************39.75**

PAY Thirty-Nine and 75/100 Dollars

To the Order of:

LOSER'S Music
728 Cumberland St
LEBANON PA 17042

NON-NEGOTIABLE

[redacted]

Losers Music Inc.
728 Cumberland St
Lebanon, PA 17042
+17172720381
losers@lmf.net
losersmusic.com

728 Cumberland St. AP

P.O. Box 616

Invoice

BILL TO	SHIP TO
[redacted] MUSIC DEPT LEHIGHTON AREA HIGH SCH 1 INDIAN LANE LEHIGHTON, PA 18235	[redacted] MUSIC DEPT LEHIGHTON AREA HIGH SCH 1 INDIAN LANE LEHIGHTON, PA 18235

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
14971	06/04/2026	$39.75	07/04/2026	Net 30	

SHIP VIA
mail

PURCHASER ORDER #
LYDIA WELLER

DESCRIPTION	QTY	RATE	AMOUNT
AWAKE THE TRUMPETS LOFTY SOUND	20	2.65	53.00

SUBTOTAL	53.00
DISCOUNT 25%	-13.25
TAX	0.00
TOTAL	39.75
BALANCE DUE	**$39.75**

PAID
JUL 27 2026

Rec all product
6-22-26
MA

6/25/25

Vendor: LOWES HOM-Lowe's Home Center Inc
P O Box 669821 DALLAS TX 75266-0775

Pymt # 0010029747
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
JUNE 26	07/02/2026		30.78	10-2620-610-000-00-130-000-026-0000	989206
JUNE 26	07/02/2026		93.45	10-2620-610-000-10-200-000-026-0000	974476
JUNE 26	07/02/2026		62.66	10-2620-610-000-00-130-000-026-0000	991499
JUNE 26	07/02/2026		3.56	10-2620-610-000-00-130-000-026-0000	980682
	Payment Amount:		**190.45**		*** Accrued A/P**

Vendor: LOWES HOM-Lowe's Home Center Inc
P O Box 669821 DALLAS TX 75266-0775

Pymt # 0010029747
07/27/2026

Invoice #	Invoice Date	PO #	Amount	Account Code	Description
JUNE 26	07/02/2026		30.78	10-2620-610-000-00-130-000-026-0000	989206
JUNE 26	07/02/2026		93.45	10-2620-610-000-10-200-000-026-0000	974476
JUNE 26	07/02/2026		62.66	10-2620-610-000-00-130-000-026-0000	991499
JUNE 26	07/02/2026		3.56	10-2620-610-000-00-130-000-026-0000	980682
	Payment Amount:		**190.45**		*** Accrued A/P**

0010029747

07/27/2026

**********190.45

PAY One Hundred Ninety and 45/100 Dollars

To the Order of:

Lowe's Home Center Inc
P O Box 669821
DALLAS TX 75266-0775

NON-NEGOTIABLE

[redacted]

Lowe's PRO

PAYMENT STUB

Account: [redacted] Statement Date: 07/02/26 Page: 1 of 4

Account: [redacted]

Your Pro Rewards are better than ever with MyLowe's Pro Rewards . Learn more about the MyLowe's Pro Rewards Program and check your points balance at Lowes.com/account.

LEHIGHTON AREA SCHOOL DIS
ATTN BUSINESS OFFICE
1000 UNION STREET
LEHIGHTON, PA 18235-1700

PLEASE INDICATE ADDRESS CHANGES

LEHIGHTON AREA SCHOOL DIS 67480
ATTN BUSINESS OFFICE L102
1000 UNION STREET
LEHIGHTON, PA 18235-1700

PAYMENT ADDRESS
Lowe's
P.O. Box 669821
Dallas TX 75266-0775

Customer Service Online at www.lowescredit.com
This account is not registered.
The authentication code is : SHOGL106

PAID
JUL 27 2026

Account Balance Summary

Current Invoices & Returns	$ 190.45
1-30 Days Past Due	$ 0.00
31-60 Days Past Due	$ 0.00
Over 60 Days Past Due	$ 0.00
Unapplied Payments & Adjustments	$ (5.94)
Statement Balance	**$ 184.51**

Amount Due

NO PAYMENT IS DUE

AMOUNT ENCLOSED $ 190.45

FOR PAYMENT ENCLOSED PLEASE CHECK ONE OF THE FOLLOWING OPTIONS:

- ☐ Payment is for entire amount billed. Please apply to all invoices.
- ☐ Payment is for specific invoices. Please indicate by ☑ beside the invoices/returns/unapplied payments you are paying/applying and return the payment stub(s) with your check.
- ☐ Apply enclosed payment to oldest invoice(s).

$ Send payments to:
Lowe's
P.O. Box 669821
Dallas TX 75266-0775

Send Billing/General Inquiries to:
P.O. Box 71772
Philadelphia PA 19176-1772

For Customer Service: call 1-866-232-7443

Purchases, returns, and payments made just prior to the statement date may not appear until the next month's statement. Any payments received after 5pm on any business day or on any day other than a business day, at the address above, will be credited on the next business day. If the payment is made at a location other than such address, credit may be delayed.

Tear Here

[redacted]

PLEASE RETURN ALL STUBS WITH YOUR PAYMENT
Retain left portion for your records.

-Continue-

PAYMENT STUB

Account: [redacted] Statement Date: 07/02/26 Page: 2 of 4 Account: [redacted]

ACCOUNT ACTIVITY

Account Number : 9800 412860 3

Current Invoices & Returns

Date	Invoice	Original Amount	Due Date	Store/City	Reference
05/08/26	980682 -QRZOOF	$ 31.62	07/20/26	2566 LEHIGHTON, PA	ADMIN
06/04/26	991499 -QVMCMR	$ 62.66	08/20/26	2566 LEHIGHTON, PA	ADMIN
06/26/26	974476 -QYJYSS	$ 93.45	08/20/26	2566 LEHIGHTON, PA	ELEMENTARY SCH
06/30/26	989206 -QYVDCI	$ 30.78	08/20/26	2566 LEHIGHTON, PA	ADMIN
Subtotal		$ 218.51			

credit $28.06 $3.56

Invoice	Please Indicate by ☑ Invoices You are Paying	Date & Amount Due
980682	☐	05/08/26 $ 3.56
991499	☐	06/04/26 $ 62.66
974476	☐	06/26/26 $ 93.45
989206	☐	06/30/26 $ 30.78
Subtotal		$ 190.45

Unapplied Payments & Adjustments

Date	Reference	Original Amount	Description
04/07/26	00292930000 0CM-1N	$ (5.94)	PAYMENT
Subtotal		$ (5.94)	

Reference	Please Indicate by ☑ Payments You are Paying	Date & Current Amount
0029293	☐	04/07/26 $ (5.94)
Subtotal		$ (5.94)

PAID
JUL 27 2026

Tear Here

Account Balance Summary
9800 412860 3

Total
$ 184.51

If you have unapplied payments and adjustments, please call us at 866-232-7443 with your instructions to apply. You do not need to contact us if you are paying the total amount now due.

-Continue-

Current Invoice Details

Mail Payments to: Lowe's
P.O. Box 669821
Dallas TX 75266-0775

LEHIGHTON AREA SCHOOL DIS
Account : [redacted]
Store/City:

Date of Sale: 04/07/26
Invoice: 002929300000CM-1N
P.O. / JOB:

S.K.U.	DESCRIPTION	QUANTITY	UNIT	PRICE	EXT. PRICE
	CASH_TO_CREDIT UNAPPLIED	1.00		(5.94)	(5.94)

Subtotal: (5.94) Tax: 0.00 Balance Due: (5.94)

Mail Payments to: Lowe's 10-2620-610-000-20-130-000-026
P.O. Box 669821
Dallas TX 75266-0775

PAID
JUL 27 2026

LEHIGHTON AREA SCHOOL DIS
Account : [redacted]
Store/City: 2566 / LEHIGHTON, PA
Buyer: [redacted]

Date of Sale: 06/04/26
Invoice: 991499 -QVMCMR
P.O. / JOB: ADMIN

S.K.U.	DESCRIPTION	QUANTITY	UNIT	PRICE	EXT. PRICE
000000005657147	KEY-IGNITION PKG'D ON CA	1.00	EA	5.68	5.68
000000001160420	HUSQ 105 XP LINE 3 LB	1.00	EA	56.98	56.98
000000000155670	PROMOTIONAL DISCOUNT APPL	1.00	EA	0.00	0.00

Subtotal: 62.66 Tax: 0.00 Balance Due: 62.66

Mail Payments to: Lowe's 10-2620-610-000-10-200-000-026
P.O. Box 669821
Dallas TX 75266-0775

PAID
JUL 27 2026

LEHIGHTON AREA SCHOOL DIS
Account : [redacted]
Store/City: 2566 / LEHIGHTON, PA
Buyer: [redacted]

Date of Sale: 06/26/26
Invoice: 974476 -QYJYSS
P.O. / JOB: ELEMENTARY SCHOOL

S.K.U.	DESCRIPTION	QUANTITY	UNIT	PRICE	EXT. PRICE
000000004927774	SPY 3/16-IN DMND GRT HOLE	1.00	EA	17.08	17.08
000000000220849	10 OZ LN HEAVY DUTY VOC	1.00	EA	3.31	3.31
000000002147450	GORILLA CLEAR MAX CON AD	1.00	EA	13.28	13.28
000000005195446	ETN ST GFCI 20A 125V IV	2.00	EA	22.31	44.62
000000000590695	SCOTCH BLUE 1.88 ORIGINAL	2.00	EA	7.58	15.16
000000000155670	PROMOTIONAL DISCOUNT APPL	1.00	EA	0.00	0.00

Subtotal: 93.45 Tax: 0.00 Balance Due: 93.45

-Continue-

Lowe's PRO

Account: [redacted] **Statement Date: 07/02/26** **Page: 4 of 4**

Mail Payments to:

Lowe's
P.O. Box 669821
Dallas TX 75266-0775

10-2620-610 000-00-130 000024

LEHIGHTON AREA SCHOOL DIS
Account : [redacted]
Store/City: 2566 / LEHIGHTON, PA
Buyer: [redacted]

Date of Sale: 06/30/26
Invoice: 989206 -QYVDCI
P.O. / JOB: ADMIN

S.K.U.	DESCRIPTION	QUANTITY	UNIT	PRICE	EXT. PRICE
000000002491096	KB 100CT UTILITY BLADES	1.00	EA	18.03	18.03
000000006592542	SUNBELT 2/4-CYCLE PRIMER	1.00	EA	11.86	11.86
000000000069521	3/8-IN X 4-1/2-IN CARRG B	1.00	EA	0.89	0.89
000000000155670	PROMOTIONAL DISCOUNT APPL	1.00	EA	0.00	0.00

Subtotal: 30.78 Tax: 0.00 Balance Due: 30.78

PAID
JUL 27 2026

COLR649A 5879 5005 A7G 07 260702 PAGE 00004 OF 00004 67480