

Vendor: MAXIMHES-Maxim Healthcare Svcs, Inc.
12559 Collection Center Drive CHICAGO IL 60693

Pymt # 0010029748
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
V30557302	06/19/2026	2016.24 10-2420-330-000-00-000-000-012-0000	LPN SCHOOL HOURS
V30557369	06/19/2026	1752.74 10-2420-330-000-00-000-000-012-0000	LPN SCHOOL HOURS
	Payment Amount:	3768.98	* Accrued A/P

Vendor: MAXIMHES-Maxim Healthcare Svcs, Inc.
12559 Collection Center Drive CHICAGO IL 60693

Pymt # 0010029748
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	Payment Amount:	3768.98	* Accrued A/P

0010029748

07/27/2026

*****3,768.98

PAY Three Thousand Seven Hundred Sixty-Eight and 98/100 Dollars

To the Order of:

Maxim Healthcare Svcs, Inc.
12559 Collection Center Drive
CHICAGO IL 60693

NON-NEGOTIABLE



12559 Collection Center Drive, Chicago, IL 60693-0125

Questions?
billquestions@maxhealth.com
443 430 8438

Lehigh School District
1000 Union Street

Lehigh, PA 18235

Invoice#		Date
V30557302		6/19/2026
Due Date		
30 Days From Receipt		
PO#	Patient Name	
	School District, Lehigh	

PAID

JUL 27 2026

School District, Lehigh
Lehigh School District

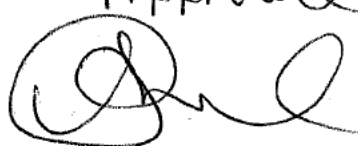
PLEASE DETACH AND RETURN UPPER PORTION WITH YOUR REMITTANCE

From	To	Description	Employee	Units	Unit Cost	Charges
6/2/2026 7:38:00 AM	6/2/2026 3:49:00 PM	LPN School Hourly		8.18	62.00	\$507.16
6/3/2026 7:35:00 AM	6/3/2026 3:52:00 PM	LPN School Hourly		8.28	62.00	\$513.36
6/4/2026 7:37:00 AM	6/4/2026 3:47:00 PM	LPN School Hourly		8.16	62.00	\$505.92
6/5/2026 7:59:00 AM	6/5/2026 3:53:00 PM	LPN School Hourly		7.90	62.00	\$489.80
Totals:				32.52		\$2,016.24

Mail checks to: 12559 Collection Center Drive, Chicago, IL 60693-0125

Credit card payments: Use secure payment portal at
<https://www.maximhealthcare.com/maxim-bill-pay>.

Thank you for choosing Maxim Healthcare Services. For questions concerning this invoice, please e-mail
billquestions@maxhealth.com or call the Billing Inquiries line at 443 430 8438. Payments may take two weeks to reflect in your total
due.

Approved
 6/20/20



12559 Collection Center Drive, Chicago, IL 60693-0125

Questions?
billquestions@maxhealth.com
443 430 8438

Lehigh School District
1000 Union Street

Lehigh, PA 18235

School District, Lehigh
Lehigh School District

PAID

JUL 27 2026

Invoice#		Date
V30557369		6/19/2026
Due Date		
30 Days From Receipt		
PO#	Patient Name	
	School District, Lehigh	

Approved
6/22/26

PLEASE DETACH AND RETURN UPPER PORTION WITH YOUR REMITTANCE

From	To	Description	Employee	Units	Unit Cost	Charges
6/9/2026 8:00:00 AM	6/9/2026 2:06:00 PM	LPN School Hourly		6.10	62.00	\$378.20
6/10/2026 7:38:00 AM	6/10/2026 3:50:00 PM	LPN School Hourly		8.20	62.00	\$508.40
6/11/2026 7:45:00 AM	6/11/2026 3:46:00 PM	LPN School Hourly		8.01	62.00	\$496.62
6/12/2026 7:52:00 AM	6/12/2026 1:50:00 PM	LPN School Hourly		5.96	62.00	\$369.52
Totals:				28.27		\$1,752.74

Mail checks to: 12559 Collection Center Drive, Chicago, IL 60693-0125

Credit card payments: Use secure payment portal at
<https://www.maximhealthcare.com/maxim-bill-pay>.

Thank you for choosing Maxim Healthcare Services. For questions concerning this invoice, please e-mail billquestions@maxhealth.com or call the Billing Inquiries line at 443 430 8438. Payments may take two weeks to reflect in your total due.

Pynt # 0010029749
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
5170532	06/20/2026	100.00 10-2620-610-000-20-500-000-026-0000	SHOE REIM 25/26
	Payment Amount:	100.00	* Accrued A/P

Pynt # 0010029749
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
5170532	06/20/2026	100.00 10-2620-610-000-20-500-000-026-0000	SHOE REIM 25/26
	Payment Amount:	100.00	* Accrued A/P

0010029749

07/27/2026

*****100.00

PAY One Hundred and 00/100 Dollars

To the Order of:

NON-NEGOTIABLE

**LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST**

DATE: 7/1/26

PAID

AMOUNT: \$100.⁰⁰

JUL 27 2026

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

REASON: Shoe allowance

25/26

SIGNATURE OF REQUESTOR

SIGNATURE OF BUSINESS A

.....

ACCOUNT CODE(S):

DEBIT: 10-2620-110-000-28-500-026-000-0000



Red Wing Store - Allentown - 872
1828 Airport Rd
Allentown, PA 18109-9384
610-821-8950

Order Number: 5170532
Date: 06/20/26, 05:27 PM
Store: Red Wing Store - Allentown - 872
Employee Name: Carolina

Sale

Customer: Michael Palinchak

Item	Price
02282D 130 CarryOut EcoLite 02282 Gray 13.0 D	\$ 244.99
Quantity:	
ASTM F2413-24, I/C, EH SRD, ASTM F2413-18, M/I/C, EH, ASTM F3445-21, SR	
SubTotal:	\$ 244.99
Sales and Use Tax	\$ 0.00

96424 130 CarryOut Anti Fatigue Slim 96424 C...	\$ 59.99
Quantity:	1
SubTotal:	\$ 59.99
Sales and Use Tax	\$ 0.00

97304 12160 CarryOut Nilit™ Breeze Cooling Lig...	\$ 19.99
Quantity:	1
SubTotal:	\$ 19.99
Sales and Use Tax	\$ 0.00

Subtotal:	\$ 324.97
Tax Amount:	\$ 0.00
Total:	\$ 324.97

Customer Amount Paid:	
Credit/Debit (4962)	\$ 324.97

PAID
JUL 27 2026

[Signature]
6-27-26

Vendor: MPS-MPS
MPS PO Box 930668 ATLANTA GA 31193-0668

Pymt # 0010029750
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
85555851	06/01/2026	3788.18 10-1110-640-000-30-800-000-060-0000	AP BUSINESS
8589690X	06/05/2026	1200.00 10-1110-640-000-30-800-000-060-0000	ONLINE PERSONAL FINANCE COURS
	Payment Amount:	4988.18	* Accrued A/P

Vendor: MPS-MPS
MPS PO Box 930668 ATLANTA GA 31193-0668

Pymt # 0010029750
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
85555851	06/01/2026	3788.18 10-1110-640-000-30-800-000-060-0000	AP BUSINESS
8589690X	06/05/2026	1200.00 10-1110-640-000-30-800-000-060-0000	ONLINE PERSONAL FINANCE COURS
	Payment Amount:	4988.18	* Accrued A/P

0010029750

07/27/2026

*****4,988.18

PAY Four Thousand Nine Hundred Eighty-Eight and 18/100 Dollars

To the Order of:

MPS
MPS
PO Box 930668
ATLANTA GA 31193-0668

NON-NEGOTIABLE



85555851

•

For remittance instructions, please see address and payment details on the back of page or visit <https://us.macmillan.com/mps/remittance>

INVOICE TO

SHIP TO

53 1 SP 0.740

LEHIGHTON AREA SCHOOL DIST
1000 UNION ST
LEHIGHTON PA 18235-1700

LEHIGHTON AREA SCHOOL DIST
ADMINISTRATION
1000 UNION STREET
LEHIGHTON PA 18235

PAID

JUL 27 2026

INVOICE

Terms: 30 Days

NO CLAIMS FOR SHORTAGES WILL BE ALLOWED AFTER 60 DAYS

DOCUMENT TYPE
INV INVOICE
INVOICE DATE
06-01-26
P.O.#
2600000695
SHIPVIA
UPS GROUND

[illegible]

51

Witcher, Lawrence 6/23/24

Canadian accounts in Canadian dollars.
All other accounts in US dollars.



VIRGINIA

16365 James Madison Highway
Gordonsville, Virginia 22942
Telephone: 888-330-8477
customerservice@mps-virginia.com

INVOICE NUMBER	PAGENUM
85555851	0

For remittance instructions, please see address
and payment details on the back of page or visit
<https://us.macmillan.com/mps/remittance>

INVOICE TO

SHIP TO

0000053 I=000000



53 1 SP 0.740

LEHIGHTON AREA SCHOOL DIST
1000 UNION ST
LEHIGHTON PA 18235-1700

LEHIGHTON AREA SCHOOL DIST
ADMINISTRATION
1000 UNION STREET
LEHIGHTON PA 18235

DOCUMENT TYPE
INV INVOICE
INVOICE DATE
06-01-26
P.O#
2600000695
SHIP VIA
UPS GROUND

-----Actual Shipment totals-----

NO CLAIMS FOR SHORTAGES WILL BE
ALLOWED AFTER 60 DAYS

Books to ship	Books	Picks	Weight	Parcels	Pallets
	30		92.370	3	

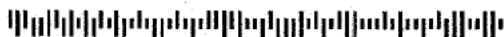
Carton and Tracking Numbers for Invoice 85555851

69683825	1ZXX34040309865874
69683832	1ZXX34040309865883
69683849	1ZXX34040309865892

Canadian accounts in Canadian dollars.
All other accounts in US dollars.

**INVOICE TO**

0000126 I=000000



126 1 SP 0.740

LEHIGHTON AREA SCHOOL DIST
1000 UNION ST
LEHIGHTON PA 18235-1700

LEHIGHTON AREA SCHOOL DIST
ADMINISTRATION
1000 UNION STREET
LEHIGHTON PA 18235

PAID

JUL 27 2026

INVOICE

Terms: 30 Days

NO CLAIMS FOR SHORTAGES WILL BE ALLOWED AFTER 60 DAYS

DOCUMENT TYPE
IEBO EBOOK
INVOICE DATE
06-05-26
P.O#
2600000695
SHIPVIA

[illegible]

51

Antich Powell 6/23/24

Canadian accounts in Canadian dollars.
All other accounts in US dollars.

Vendor: NASSP-NASSP
PO Box 640245 PITTSBURGH PA 15264-0245

Pymt # 0010029751
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
9002133492	05/11/2026	385.00 10-2380-810-000-30-800-000-080-0000	NATIONAL HONOR SOCIETY MEMBERS
Payment Amount:		385.00	

Vendor: NASSP-NASSP
PO Box 640245 PITTSBURGH PA 15264-0245

Pymt # 0010029751
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
9002133492	05/11/2026	385.00 10-2380-810-000-30-800-000-080-0000	NATIONAL HONOR SOCIETY MEMBERS
Payment Amount:		385.00	

0010029751

07/27/2026

*****385.00

PAY Three Hundred Eighty-Five and 00/100 Dollars

To the Order of:

NASSP
PO Box 640245
PITTSBURGH PA 15264-0245

NON-NEGOTIABLE

**LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST**

DATE: 6-7-26

PAID

AMOUNT: \$385.00

JUL 27 2026

REQUEST A CHECK FROM 10 FUND PAYABLE TO:

NASSP

PO Box 640245

Pittsburgh PA 15264-0245

REASON: National Honor Society Affiliation

July 1, 2026 - June 30, 2027

SIGNATURE OF REQUESTOR:

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

ACCOUNT CODE(S):

DEBIT: 10-2380-810-000-30-800-000-080-0000



National Honor Society
P.O. Box 640245
Pittsburgh, PA 15264-0245



nhs.us



membership@nhs.us



1-800-253-7746

5644010319

PRESORT PBP\$027 <B3>



MS SUZANNE HOWLAND OR PRINCIPAL
LEHIGHTON AREA HIGH SCHOOL
1 INDIAN LN
LEHIGHTON PA 18235-2311

PAID

JUL 27 2026

Signature 7/8/20

School ID

Email: showland@lehighton.org

INVOICE

ORDER NUMBER

PRODUCT

National Honor Society Affiliation
July 01, 2026 - June 30, 2027

INVOICE DATE:

05/11/2026

TOTAL

\$385.00

Total Amount Due (USD): \$385.00

YOUR NHS MEMBERSHIP WILL EXPIRE ON JUNE 30

Reminder: Your school may not operate an NHS chapter without an active membership.



PAY BY CHECK

Submit payment & invoice to:
NASSP
P.O. BOX 640245
PITTSBURGH, PA 15264-0245



PAY ONLINE

The fastest & easiest
way to renew your
NHS membership:
Nhs.us/renew



PAY BY PHONE

Have questions?
Our customer care team
is here for you!
1-800-253-7746

PLEASE DETACH AND MAIL WITH YOUR PAYMENT.

PAYMENT SLIP

School ID: 00005324
Order Number: 9002133492
Payment Due: 6/30/2026
Total Due: \$385.00
Amount Enclosed: \$

NASSP is the proud sponsor of NHS, NJHS, NEHS, and NASC.

NASSP
National Association
of Secondary School Principals

Make checks payable to:

NASSP
P.O. BOX 640245
PITTSBURGH, PA 15264-0245



Vendor: NORTHAM03-Northampton Area Cross Country Booster Club
Northampton Area High School 1619 Laubach Ave NORTHAMPTON PA

Pymt # 0010029752
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
INVITATIONAL	07/10/2026	400.00 10-3250-810-000-30-800-008-000-0000	INVITATIONAL 9/5/26
Payment Amount:		400.00	

Vendor: NORTHAM03-Northampton Area Cross Country Bo
Northampton Area High School 1619 Laubach Ave NORTHAMPTON PA

Pymt # 0010029752
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
INVITATIONAL	07/10/2026	400.00 10-3250-810-000-30-800-008-000-0000	INVITATIONAL 9/5/26
Payment Amount:		400.00	

0010029752

07/27/2026

*****400.00

PAY Four Hundred and 00/100 Dollars

To the Order of:

Northampton Area Cross Country Booster Club
Northampton Area High School
1619 Laubach Ave
NORTHAMPTON PA 18067

NON-NEGOTIABLE

**LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST**

DATE: 7/10/26

AMOUNT: 400.00

REQUEST A CHECK FROM 10 FUND PAYABLE TO:

Northampton Area Cross Country
Booster Club

PAID

JUL 27 2026

REASON: Invitational

SIGNATURE OF REQUESTOR:

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

ACCOUNT CODE(S):

DEBIT: 10-3250-810-000-30-800-008-000-0000

[Upgrade](#)[RESULTS](#)[RANKINGS](#)[CALENDAR](#)[ATHLETES](#)[TEAMS](#)[COVERAGE](#)[Upgrade](#)
Search
Login

NORTHAMPTON CROSS COUNTRY INVITATIONAL 2026 2026

[Register Online Now](#)

Sep 5, 2026
Bicentennial Park
East Allen Township, PA

Hosted by: Northampton Area 11
Registration Closes in 37 days

[Meet History](#)[Virtual Meet](#)[Home](#)[Results](#)[Teams](#)[Entries](#)

Meet Information

Online Registration Instructions

[Back to Meet Coverage](#)

Contact Person - Jaclyn Grejda - grejdaj@nasdschools.org

Schedule:

Girls Varsity (top 7) @ 9:00AM

Boys Varsity (top 7) @ 9:45AM

Girls JV (unlimited) @ 10:30AM

Boys JV (unlimited) @ 11:15AM

Girls Middle School @ 12:00PM

Boys Middle School @ 12:30PM

Payment Information:

*\$100 per Varsity team and \$50 per JV team. Boys and Girls are separate teams. It would be \$300 for all four HS races (grades 9-12)

*\$50 per Middle School team. Boys and Girls are separate teams. It would be \$100 for both MS races (grades 7 and 8)

*Payments due by 8/15/2026

*Makes checks out to - Northampton Area Cross Country Booster Club

*Mailing Address : Northampton Area High School

PAID**JUL 27 2026****MileSplit PRO**

To get the full depth of our meet coverage,
become PRO!

[JOIN NOW](#)

Join to Claim Athletes and Teams

Get notified about Race Videos, Personal
Content, and more!

[Get Started](#)

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[Accept All](#)[Reject Non-Essential](#)[Manage Preferences](#)

Vendor: NORTHEA02-Northeast Janitorial Supply LLC
847 N Gilmore St ALLENTOWN PA 18109-0000

Pymt # 0010029753
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
64961	07/02/2026	1934.25 10-2620-610-000-30-800-000-026-0000	FLOOR FINISH
64961	07/02/2026	1934.25 10-2620-610-000-20-500-000-026-0000	FLOOR FINISH
64961	07/02/2026	3868.50 10-2620-610-000-10-200-000-026-0000	FLOOR FINISH
Payment Amount:		7737.00	

Vendor: NORTHEA02-Northeast Janitorial Supply LLC
847 N Gilmore St ALLENTOWN PA 18109-0000

Pymt # 0010029753
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
64961	07/02/2026	1934.25 10-2620-610-000-30-800-000-026-0000	FLOOR FINISH
64961	07/02/2026	1934.25 10-2620-610-000-20-500-000-026-0000	FLOOR FINISH
64961	07/02/2026	3868.50 10-2620-610-000-10-200-000-026-0000	FLOOR FINISH
Payment Amount:		7737.00	

0010029753

07/27/2026

*****7,737.00

PAY Seven Thousand Seven Hundred Thirty-Seven and 00/100 Dollars

To the Order of:

Northeast Janitorial Supply LLC
847 N Gilmore St
ALLENTOWN PA 18109-0000

NON-NEGOTIABLE

**NORTHEAST JANITORIAL
SUPPLY, LLC.**

847 N. GILMORE STREET
ALLENTOWN, PA 18109-1862
610-439-3200 FAX: 610-439-3202

INVOICE

Date	Invoice #
7/2/2026	64961

Bill To	Ship To
LEHIGHTON AREA SCHOOL DISTRICT 1000 UNION STREET LEHIGHTON, PA 18235	LEHIGHTON AREA SCHOOL DISTRICT 1000 UNION STREET LEHIGHTON, PA 18235 JUSTIN SMITH 484-226-4084 (MISSY 610-377-4490 X1536)

PAID

JUL 27 2026

P.O. Number	Rep	Terms	Ship Via	Ship Date	Due Date
JUSTIN	AT	NET 20	OUR TRUCK	7/2/2026	7/22/2026

Qty	Item	Description	U/M	Price	Amount
75	CLARION 25 FLO...	BUCKEYE CLARION 25 FLOOR FINISH	AP	103.16	7,737.00
		10-2620-610-000-34-800-000-026 - 1934.25			
		10-2620-610-000-20-500-000-026 - 1934.25			
		10-2620-610-000-10-200-000-024 - 3868.50			

[Handwritten signature]
7-22-26

Thank you for your business.

Tax (0.0%) \$0.00

Total \$7,737.00

Vendor: Numworks-Numworks
1100 Crescent Green #120 CARY NC 27518

Pymt # 0010029754
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
US26060100066	06/01/2026	5579.40 10-1110-610-000-30-800-000-080-0000	GRAPHING CALCULATOR
Payment Amount:		5579.40	* Accrued A/P

Vendor: Numworks-Numworks
1100 Crescent Green #120 CARY NC 27518

Pymt # 0010029754
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
US26060100066	06/01/2026	5579.40 10-1110-610-000-30-800-000-080-0000	GRAPHING CALCULATOR
Payment Amount:		5579.40	* Accrued A/P

0010029754

07/27/2026

*****5,579.40

PAY Five Thousand Five Hundred Seventy-Nine and 40/100 Dollars

To the Order of:

Numworks
1100 Crescent Green #120
CARY NC 27518

NON-NEGOTIABLE



Invoice

*Rec all product
info*

NUMWORKS

NumWorks, Inc.
4509 Creedmoor Rd #201
Raleigh, NC 27612
United States

PAID

JUL 27 2026

Invoice number US26060100066

Date 06/01/2026

Due date 07/01/2026

Order number BC2605210002

Customer reference number PO #2600000698

Order channel workshop.numworks.com/business

Order date 06/01/2026

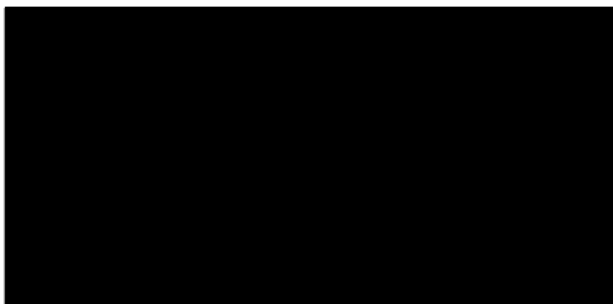
Bill to

Lehigh Area Senior High School
1 Indian Ln
Lehigh PA 18235
United States

Ship to

Lehigh Area Senior High School
1 Indian Ln
Lehigh PA 18235
United States

PRODUCT	QUANTITY	UNIT PRICE (USD)	TOTAL PRICE (USD)
NumWorks Graphing Calculator	60	124.99 USD	7,499.40 USD
Discount	60	-32.00 USD	-1,920.00 USD
NumWorks Graphing Calculator	2	0.00 USD	0.00 USD
Shipping			0.00 USD
Subtotal			5,579.40 USD
Tax (PA Exemption)			0.00 USD
Total			5,579.40 USD



6-15-26

Payment terms

Payment expected on: 07/01/2026

Past this date, a 40.00 USD collection fee and 10% penalty will be applied. Please mention the invoice number US26060100066 in your payment.

Vendor: PANTHER02-Panther Valley School District
Attn: Lisa Mace ACE Administrator 678 Panther Pride Dr LANSF

Pymt # 0010029755
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
2600000157	06/10/2026	255.00 10-2720-513-411-10-200-000-090-0000	HOMELESS TRANSPORTATION-APR/JU
	Payment Amount:	255.00	* Accrued A/P

Vendor: PANTHER02-Panther Valley School District
Attn: Lisa Mace ACE Administrator 678 Panther Pride Dr LANSF

Pymt # 0010029755
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
2600000157	06/10/2026	255.00 10-2720-513-411-10-200-000-090-0000	HOMELESS TRANSPORTATION-APR/JU
	Payment Amount:	255.00	* Accrued A/P

0010029755

07/27/2026

*****255.00

PAY Two Hundred Fifty-Five and 00/100 Dollars

To the Order of:

Panther Valley School District
Attn: Lisa Mace
ACE Administrator
678 Panther Pride Dr
LANSFORD PA 18232

NON-NEGOTIABLE

R
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PANTHER VALLEY SCHOOL DISTRICT
1 PANTHER WAY
LANSFORD, PA 18232
Ph: 570-645-3176
Fax: 570-645-3036

INVOICE

Invoice #: 2600000157
Date: 6/10/2026

Bldg: DISTRICTWIDE

C
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Attention/Dept:
Lehigh Area School District
1000 Union St
LEHIGHTON, PA 18235

PAID

JUL 27 2026

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Customer Code	Customer PO #	Invoice Description			
LS182		April-June Homeless Transportation			
Description	Quantity	U/M	Unit Price	Amount	
Transp Nesque 	1.00		255.00	255.00	
$\$238.00 \text{ (per day)} \times 15 \text{ days} = \$3,570.00$					
$\$3,570.00 / 7 \text{ (kids on van)} = \510.00					
$\$510.00 / 2 = \$255.00 \text{ for fifteen days}$					
TOTAL:				255.00	

Note:

INVOICE TERMS AND CONDITIONS

vendor

Vendor: PASBO-PASBO
2608 Market Place HARRISBURG PA 17110

Pymt # 0010029756
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
591128	07/01/2026	800.00 10-2513-810-000-00-000-000-025-0000	LEA TIER 2 (4-7)
Payment Amount:		800.00	

Vendor: PASBO-PASBO
2608 Market Place HARRISBURG PA 17110

Pymt # 0010029756
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
591128	07/01/2026	800.00 10-2513-810-000-00-000-000-025-0000	LEA TIER 2 (4-7)
Payment Amount:		800.00	

0010029756

07/27/2026

*****800.00

PAY Eight Hundred and 00/100 Dollars

To the Order of:

PASBO
2608 Market Place
HARRISBURG PA 17110

NON-NEGOTIABLE

**PAID**

JUL 27 2026

Bill To: Leighton Area SD 1000 Union Street Leighton, PA 18235	Ship To: Leighton Area SD 1000 Union Street Leighton, PA 18235	Invoice #: 591128 Invoice Description: PASBO - LEA Tier 2 (4-7 members) (07/01/2026- 06/30/2027) Due Date: June 14, 2026 Order Date: May 15, 2026 Order Total: \$800.00
--	--	---

Your Order Details

Description	Tax	Tax Rate	Unit Price	Price
LEA Tier 2 (4-7)				\$800.00

Item(s) Subtotal: \$800.00

Total Before Tax: \$800.00

Sales Tax: \$0.00

Total for this Order: \$800.00**Total Payment: \$0.00****Balance: \$800.00**

Remit to:
PASBO
2608 Market Place
Harrisburg, PA 17110

12

Vendor: PITNEY 03-Pitney Bowes Global Financial Serv
PO Box 981022 BOSTON MA 02298

Pymt # 0010029757
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
3322822971	06/23/2026	213.00 10-2513-530-000-00-000-000-025-0000	METER READING JULY & AUGUST
3322822971	06/23/2026	213.00 10-2513-530-000-00-000-000-025-0000	METER READING MAY & JUNE
Payment Amount:		426.00	

Vendor: PITNEY 03-Pitney Bowes Global Financial Ser
PO Box 981022 BOSTON MA 02298

Pymt # 0010029757
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
3322822971	06/23/2026	213.00 10-2513-530-000-00-000-000-025-0000	METER READING JULY & AUGUST
3322822971	06/23/2026	213.00 10-2513-530-000-00-000-000-025-0000	METER READING MAY & JUNE
Payment Amount:		426.00	

0010029757

07/27/2026

*****426.00

PAY Four Hundred Twenty-Six and 00/100 Dollars

To the Order of:

Pitney Bowes Global Financial Serv
PO Box 981022
BOSTON MA 02298

NON-NEGOTIABLE



Coming soon, your invoices will only be available online.

Go to pitneybowes.com/paperlessbill to:

- Go Paperless now and enroll in AutoPay
- View, print and pay online 24/7
- Access our Help Center or live chat

Account Number

Invoice Number

Billing Period

Invoice Date

AMOUNT DUE Aug 11 2026

3322822971

May 12 2026 to Aug 11 2026

Jun 23 2026

\$426.00

PAID

JUL 27 2026

DETAILS OF YOUR CHARGES Billing period: May 12 2026 - Aug 11 2026

Description

Certified Pre-Owned C AUTO 95

Product/Serial #: 7H00 / 6200409 C Series IMI Meter

Total

\$426.00

Total tax

\$0.00

AMOUNT DUE

\$426.00

To pay by mail, complete and send the coupon below. Please allow 7-10 business days for mail and processing time.

Page 1 of 2

DUNS 83-178-3217, TAX ID 20-1344287

Tear off here

00000058

Pitney Bowes

27 Waterview Drive
Shelton, CT 06484

Pitney Bowes payment coupon

If you've chosen to pay by mail, please include this payment coupon with your payment.

Account #: 0012912506

Invoice date: Jun 23, 2026

Payment amount due: \$426.00

Invoice #: 3322822971

Due date: Aug 11, 2026

426.00

MDG2026 00007580 01



0012912506

LEHIGHTON AREA SCHOOL
DISTRICT
REBECCA P KARPOWICZ
1000 UNION ST
LEHIGHTON PA 18235-1798

PITNEY BOWES GLOBAL FINANCIAL SERVICE
PO BOX 981022
BOSTON MA 02298-1022

Change of address/contact information?

Please update at pitneybowes.com/us/support/addresschange.

Vendor: PMEA-PMEA
56 South Third Street HAMBURG PA 19526

Pymt # 0010029758
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
MEMBERSHIP	07/08/2026	170.00 10-1110-810-000-20-500-000-050-0000	MEMBERSHIP-KACYON
MEMBERSHIP	07/08/2026	150.00 10-1110-810-000-20-500-000-050-0000	MEMBERSHIP-MARCIANTE
Payment Amount:		320.00	

Vendor: PMEA-PMEA
56 South Third Street HAMBURG PA 19526

Pymt # 0010029758
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
MEMBERSHIP	07/08/2026	170.00 10-1110-810-000-20-500-000-050-0000	MEMBERSHIP-KACYON
MEMBERSHIP	07/08/2026	150.00 10-1110-810-000-20-500-000-050-0000	MEMBERSHIP-MARCIANTE
Payment Amount:		320.00	

0010029758

07/27/2026

*****320.00

PAY Three Hundred Twenty and 00/100 Dollars

To the Order of:

PMEA
56 South Third Street
HAMBURG PA 19526

NON-NEGOTIABLE



Telephone: (610) 562-9757 - Toll Free 1-888-919-PMEA (7632) - Fax (610) 562-9760

Register Online At: www.pmea.net

PAID

Membership Application - July 1st, 2026 - June 30th, 2027

Active membership in the Pennsylvania Music Educators Association is open to individuals engaged in music teaching or other music-related educational work. Retired membership is open to former PMEA/NAfME members who have retired from teaching or other music-related educational work. Collegiate membership is open to music students in teacher education programs at college/university level who are not employed full time as teachers. Introductory membership is open to persons in their first year (for one year only) of full-time music teaching or other music-related education work who have been collegiate members during the preceding fiscal year. Please see PMEA's Bylaws for further information.

New ☐ Renewal ☒ (PMEA/NAfME ID# [redacted])

Please print your NAME and HOME ADDRESS below:

Country (Outside of U.S. Only): _____

[redacted] (☐ home ☒ cell)

Email: rmarciante@lehighton.org

Please print your WORK ADDRESS below:

School Name: Lehighton Area Middle School

Address: 301 Beaver Run Road

City, State, and Zip Code:

Lehighton PA 18235

Country (Outside of U.S. Only): _____

Work Telephone: 610-377-6535

Email: rmarciante@lehighton.org

Principal's Name: Stephen Ebbert

Mail all membership materials to: Home ☐ Work ☒

Email all membership information to: Home ☐ Work ☒

☒ I am willing/interested in serving as an officer or volunteer:

Area of Interest: ☐ State Officer ☐ Council Member

☐ District Officer ☒ Other (Specify) Host

General Membership (Choose Type)

Active \$150 ☒ Retired \$73 ☐

Active Spousal \$130 ☐ PMEA Only-Retired \$40 ☐

PCMEA (Collegiate) \$46 ☐

Introductory (Recent Graduates and PCMEA/
Collegiate NAfME Members) \$98 ☐

Additional Options:

☐ Tax Deductible contribution to PMEA Scholarship Fund
\$ _____

☐ Music Educators Journal (print version) \$20.00

☐ Journal of Research in Music Education (print version) \$50.00

Total Amount Enclosed: \$ 150.00

Make Checks Payable to PMEA Or Pay with Credit Card

Type of Card: _____ Exp. Date _____

Credit Card Number: _____

CVV (3-digit Security Code) _____

Billing Address: _____

Card Holder Name (Print) _____

Signature _____

Teaching Levels

Pre-School ☐ Elementary ☐ Jr./Middle School ☒

Sr./High School ☒ College/University ☐

Music Administrator/Supervisor ☐ Private/Studio ☐

Teaching Areas

Band ☒ Choral ☐ General Music ☒ Guitar ☒

History/Theory ☒ Jazz ☒ Keyboard ☐

Marching Band ☒ Modern Band ☐ Orchestra ☐

Research ☐ Show Choir ☐ Special Education ☐

Teacher Education ☐ Technology ☐ Voice ☐

Year you began teaching: 1999

Year you started in Present position: 2023

List type of degree(s) earned and granting institution:

PSU-BsMuEd; Immaculata -SpEd cert, Gratz Mac

Principal Instrument: Flute/voice

☐ Do Not E-mail (you will not receive PMEA e-mail blasts and updates)

☐ Do Not Mail

☐ Do not include me in the Membership Directory (member access only)

Office Use Only:

PMEA Cannot Accept Purchase Orders without payment



Pennsylvania Music Educators Association

56 South Third Street, Hamburg, PA 19526

Telephone: (610) 562-9757 - Toll Free 1-888-919-PMEA (7632) - Fax (610) 562-9760

Register Online At: www.pmea.net

Membership Application - July 1st, 2026 - June 30th, 2027

PAID

Active membership in the Pennsylvania Music Educators Association is open to individuals engaged in music teaching or other music-related educational work. Retired membership is open to former PME/NAME members who have retired from teaching or other music-related educational work. Collegiate membership is open to music students in teacher education programs at college/university level who are not employed full time as teachers. Introductory membership is open to persons in their first year (for one year only) of full-time music teaching or other music-related education work who have been collegiate members during the preceding fiscal year. Please see PME/NAME's Bylaws for further information.

New ☐ Renewal ☒ (PME/NAME ID#: 2082153)

Please print your NAME and HOME ADDRESS below:

Please print your WORK ADDRESS below:

School Name: Wharton Area Middle School

Address: 301 Beaver Run Rd

City, State, and Zip Code: Wharton, PA 18235

Country (Outside of U.S. Only): _____

Work Telephone: 610-377-6535

Email: dkayen@wharton.org

Principal's Name: Stephen Elliott

Mail all membership materials to: Home ☐ Work ☒

Email all membership information to: Home ☐ Work ☒

☒ I am willing/interested in serving as an officer or volunteer:

Area of Interest: ☒ State Officer ☒ Council Member

☒ District Officer ☐ Other (Specify) _____

General Membership (Choose Type)

Active \$150 ☒ Retired \$73 ☐

Active Spousal \$130 ☐ PME/NAME Only-Retired \$40 ☐

PCMEA (Collegiate) \$46 ☐

Introductory (Recent Graduates and PCMEA/
Collegiate NAME Members) \$98 ☐

Additional Options:

☐ Tax Deductible contribution to PME/NAME Scholarship Fund \$ _____

☒ Music Educators Journal (print version) \$20.00

☐ Journal of Research in Music Education (print version) \$50.00

Total Amount Enclosed: \$ 170.00

Make Checks Payable to PME/NAME Or Pay with Credit Card

Type of Card: _____ Exp. Date: _____

Credit Card Number: _____

CVV (3-digit Security Code) _____

Billing Address: _____

Card Holder Name (Print) _____

Signature _____

Teaching Levels

Pre-School ☐ Elementary ☐ Jr/Middle School ☒

Sr./High School ☐ College/University ☐

Music Administrator/Supervisor ☐ Private/Studio ☐

Teaching Areas

Band ☐ Choral ☒ General Music ☒ Guitar ☒

History/Theory ☐ Jazz ☐ Keyboard ☐

Marching Band ☐ Modern Band ☐ Orchestra ☐

Research ☐ Show Choir ☒ Special Education ☐

Teacher Education ☐ Technology ☐ Voice ☐

Year you began teaching: 2018

Year you started in Present position: 2

List type of degree(s) earned and granting institution:

B.M. Music Ed/Composition MM Choral Conducting WCU

Principal Instrument: Piano

☐ Do Not E-mail (you will not receive PME/NAME e-mail blasts and updates)

☐ Do Not Mail

☐ Do not include me in the Membership Directory (member access only)

Office Use Only:

PME/NAME Cannot Accept Purchase Orders without payment

Vendor: PYEBARFIS-Pye-Barker Fire & Safety
Lockbox: Alarm PO Box 737545 DALLAS TX 75373

Pymt # 0010029759
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
8729855	07/15/2026	3454.87 10-2620-350-000-10-200-000-026-0000	ANNUAL FIRE ALARM INSPECTION-E
Payment Amount:		3454.87	

Vendor: PYEBARFIS-Pye-Barker Fire & Safety
Lockbox: Alarm PO Box 737545 DALLAS TX 75373

Pymt # 0010029759
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
8729855	07/15/2026	3454.87 10-2620-350-000-10-200-000-026-0000	ANNUAL FIRE ALARM INSPECTION-E
Payment Amount:		3454.87	

0010029759

07/27/2026

*****3,454.87

PAY Three Thousand Four Hundred Fifty-Four and 87/100 Dollars

To the Order of:

Pye-Barker Fire & Safety
Lockbox: Alarm
PO Box 737545
DALLAS TX 75373

NON-NEGOTIABLE



Keystone Fire and Security
A Pye-Barker Fire & Safety Company
433 Industrial Drive
North Wales, PA 19454
(888) 641-0100

Invoice

Invoice Number
8729855

Date
07/15/2026

Due Date
08/14/2026

TO VIEW AND PAY ONLINE GO TO:

myaccount.pyebarkerfs.com

REFERENCE CODE:

PBFS-SA

Customer Name
Lehigh Area School District

P.O. Number

Invoice Number
8729855

Due Date
Net 30

Quantity

Description

Rate

Amount

Lehigh Area Elementary Center, 3 Indian Lane, Lehigh, PA

1.00 Annual Fire Alarm Inspection
1.00 Temporary Additional Fuel Surcharge
Sales Tax
Payments/Credits Applied

3439.92
14.95
\$0.00
\$0.00

PAID

JUL 27 2026

Invoice Balance Due: **\$3,454.87**

IMPORTANT MESSAGES

Annual fire alarm inspection completed 7/14/26 See NDR for deficiencies.

10-2020-350 000 - 10-200-000-000

[Handwritten signature]
7-21-26

Date	Invoice #	Description	Amount	Balance Due
07/15/2026	8729855	Inspection Services	\$3,454.87	\$3,454.87

PLEASE SEE REVERSE SIDE FOR IMPORTANT INFORMATION



Keystone Fire and Security
A Pye-Barker Fire & Safety Company
433 Industrial Drive
North Wales, PA 19454
(888) 641-0100
Return Service Requested

Invoice

Invoice Number
8729855

Date
07/15/2026

Due Date
08/14/2026

Net Due: **\$3,454.87**

Amount Enclosed: 3454.87

Lehigh Area School District
Business Office
1000 Union Street
Lehigh PA 18235

REMIT TO:
Pye-Barker Fire & Safety
Lockbox: Alarm
PO Box 737545
Dallas, TX 75373

Pymt # 0010029760
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
			150.00		* Accrued A/P

Payment Amount:

Pymt # 0010029760
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
			150.00		* Accrued A/P

Payment Amount:

0010029760

07/27/2026

*****150.00

PAY One Hundred Fifty and 00/100 Dollars

To the Order of:

NON-NEGOTIABLE

**LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST**

DATE: 6/24/2026

AMOUNT: \$150.00

PAID

JUL 27 2026

RECEIVED

REQUEST A CHECK FROM 10 FUND PAYABLE TO:



REASON: LAVA Internet Reimbursement for Student

Handwritten signature

SIGNATURE OF REQUESTOR:

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

Handwritten signature

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

DEBIT:

6/25/26

Lehigh Area School District—LAVA Internet Reimbursement Form

Students participating in Lehigh 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@lehigh.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.

Semester *

- ☐ First Semester
- ☒ Second Semester

Student Full Name *

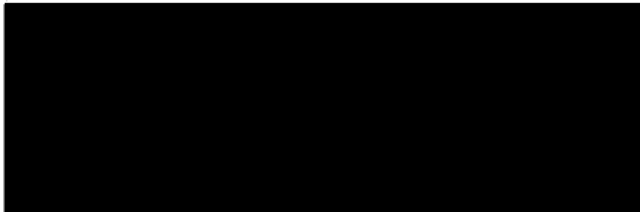
**PAID**

JUL 27 2026

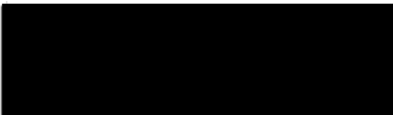
*

Check Made Payable to:

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



Electronic Signature (First & Last Name) *



Please upload all internet service billing for the semester. *



DynamicPDF (38...



DynamicPDF (39...



DynamicPDF (40...



DynamicPDF (41...



DynamicPDF (42...



Add file

PAID
JUL 27 2026

This form was created outside of your domain.

Google Forms

Vendor: RIDDELL A-Riddell All American Sports Corp
P.O. Box 676256 DALLAS TX 75267

Pymt # 0010029761
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
60563580	06/16/2026	4110.00 10-3250-610-000-30-800-013-000-0000	HELMET
	Payment Amount:	4110.00	* Accrued A/P

Vendor: RIDDELL A-Riddell All American Sports Corp
P.O. Box 676256 DALLAS TX 75267

Pymt # 0010029761
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
60563580	06/16/2026	4110.00 10-3250-610-000-30-800-013-000-0000	HELMET
	Payment Amount:	4110.00	* Accrued A/P

0010029761

07/27/2026

*****4,110.00

PAY Four Thousand One Hundred Ten and 00/100 Dollars

To the Order of:

Riddell All American Sports Corp
P.O. Box 676256
DALLAS TX 75267

NON-NEGOTIABLE

Pay online at Riddell.com or Remit to:
 RIDDELL ALL AMERICAN SPORTS
 PO BOX 676256
 DALLAS TX 75267-6256
 USA
 FED I.D. 34-1688715
 BILL TO:36658

Riddell

INVOICE

Invoice	60563580
Inv Date	06/16/2026
Reference	

SHIP TO:36658

LEHIGHTON AREA HIGH SCHOOL
 ATTN: ATHLETIC DEPARTMENT
 1 INDIAN LANE
 LEHIGHTON PA 18235
 USA

LEHIGHTON AREA HIGH SCHOOL
 ATTN: ATHLETIC DEPARTMENT
 1 INDIAN LANE
 LEHIGHTON PA 18235
 USA

PAID

JUL 27 2026

Total Savings Value from Catalog Prices \$ 5,167.00 (Savings already applied to Invoice Total)

Sales Rep	MIKE ZAMBO	Contact Person	Tom McCarroll
Sales Rep Email	MAZAMBO@RIDDELLSALES.COM	Contact Person Email	

Order #	Customer PO	Payment terms	Ship Via
442608575		30 days Due net	FedEx Ground

Item	Material	Item Description	Color	XS	S	M	L	XL	2XL	OTH	QTY	U. Price	Ext Price
05	FB_HELMET_SF_EC HO	SF Echo	Maroon								2		802.00
		ECHO								2	2	385.00	
		PAINT								2	2	13.25	
		HELMET_PAINT_B								2	2	2.75	
		QUICK_RELEASE								2	2		
10	FB_HELMET_SF_EC HO	SF Echo	Maroon								5		2,005.00
		ECHO								5	5	385.00	
		PAINT								5	5	13.25	
		HELMET_PAINT_B								5	5	2.75	
		QUICK_RELEASE								5	5		
15	FB_HELMET_SF_EC HO	SF Echo	Maroon								3		1,203.00
		ECHO_1X								3	3	385.00	
		PAINT								3	3	13.25	
		HELMET_PAINT_B								3	3	2.75	
		QUICK_RELEASE								3	3		
05	FB_HELMET_SF_EC HO	SF Echo	Maroon								2		0.00
		ECHO								2	2		
		HELMET_PAINT_B								2	2		
		PAINT								2	2		
		QUICK_RELEASE								2	2		

PLEASE NOTE YOUR ACCOUNT NUMBER AND INVOICE NUMBER ON REMITTANCE TO ENSURE PROPER APPLICATION OF YOUR PAYMENT. *Thank you for your order. If you have any issues with your order upon arrival,

Please contact your sales representative or customer service at 800-275-5338 within 10 days of receipt. All returned items require a return authorization and are subject to a 25% restocking fee. All invoices not paid within invoice terms are

PAST DUE and subject to a FINANCE CHARGE at a monthly rate of 1.5%.

Subtotal USD	4,010.00
Freight/Handling USD	100.00
Sales Tax USD	0.00
Payment Received	(0.00)
Balance Due	4,110.00

Vendor: SCHOOL 17-School Specialty LLC
PO BOX 825640 PHILADELPHIA PA 19182-5640

Pymt # 0010029762
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
208137108163	06/13/2026	440.56 10-1110-610-000-30-800-000-080-0000	MARKERS, MOD PODGE, BOARD MAT,
	Payment Amount:	440.56	* Accrued A/P

Vendor: SCHOOL 17-School Specialty LLC
PO BOX 825640 PHILADELPHIA PA 19182-5640

Pymt # 0010029762
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
208137108163	06/13/2026	440.56 10-1110-610-000-30-800-000-080-0000	MARKERS, MOD PODGE, BOARD MAT,
	Payment Amount:	440.56	* Accrued A/P

0010029762

07/27/2026

*****440.56

PAY Four Hundred Forty and 56/100 Dollars

To the Order of:

School Specialty LLC
PO BOX 825640
PHILADELPHIA PA 19182-5640

NON-NEGOTIABLE



To Track your order, go to:
<http://www.schoolspecialty.com/track-your-order>

Invoice

Invoice Number : 208137108163
Order/Ref Number : 1055696013
Invoice Date : 13-JUN-2026

Page 1 of 1

Bill To Attention :

Ship To : LEHIGHTON AREA HIGH SCHOOL
1 INDIAN LN
LEHIGHTON, PA 18235

Bill To : LEHIGHTON AREA SCHOOL DISTRICT
1000 UNION ST
LEHIGHTON, PA 18235

PAID

JUL 27 2026

Immediately upon receipt of your order, please examine the carton contents for damaged or missing product. Retain damaged items and their packaging. Contact us within 5 days to report any damages or shortages. Product returned without authorization, additional items not part of the original authorization, or products arriving in an unsellable condition will not be eligible for credit.

Please sign into your online account to view your current discount before submitting purchase orders.

Quantity Ordered	UOM	Quantity Shipped	Quantity Remaining	Ordered Item	Our Item (if different)	Description	Unit Price	Net Price	Extended Price
1	EA	1		1530187		MARKER SHARPIE PERMANENT FINE BLACK PACK OF 36	53.290	34.640	34.64
2	EA	2		408589		MOD PODGE GLOSS GALLON	59.190	38.470	76.94
2	EA	2		451520		GLAZE SAX COLORBURST MYSTIC JADE PINT	25.990	16.890	33.78
3	EA	3		405225		BOARD MAT CRESCENT 20X32IN SMOOTH BLACK PK OF 10	69.990	45.490	136.47
1	EA	1		2013715		MARKER SHARPIE BLACK ULTRA FINE PACK OF 36	51.090	33.210	33.21
6	EA	6		084810		ERASER VINYL SCHOOL SMART PACK OF 20	7.690	1.770	10.62
1	EA	1		2003164		UNDERGLAZE SAX BLACK GALLON	149.990	97.490	97.49
1	EA	1		407327		GLAZE MAYCO ELEMENTS CHUNKIES EL-209 NIGHT SKY CHUNKIES PINT	26.790	17.410	17.41
								Subtotal \$	440.56
								Taxes \$	.00
								Shipping/Handling \$	.00
								INVOICE Total \$	440.56

Delivery Tracking Information:

Carrier	Reference #
FEDERAL EXPRESS	529504392940 529504393784 529504394232 529504394243 529504396110 529504396121 529504396132 529504396463

<< tear along this perforation >>

REMITTANCE STUB

To ensure proper credit, please return this portion with remittance.

Customer Name: LEHIGHTON AREA SCHOOL DISTRICT
and PO Number: 1011006100002050050

Customer Number : [REDACTED] USD
Invoice Number : 208137108163
Invoice Date : 13-JUN-2026
Due Date : 13-JUL-2026
Taxes : \$ 0.00
Shipping/Handling : \$ 0.00
Invoice Amount : \$ 440.56
Less payments : \$ 0.00
Balance DUE : \$ 440.56
Remittance Amount : \$ 440.56

Make Checks
Payable To: SCHOOL SPECIALTY LLC
& Mail To: PO BOX 825640
PHILADELPHIA, PA 19182-5640



Pymt # 0010029763
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
MILEAGE REIM	04/01/2026	223.26 10-2269-580-000-00-000-000-012-0000	DISTRICT CONTACTS MEETING, GRA
MILEAGE REIM	05/06/2026	53.70 10-2269-580-000-00-000-000-012-0000	DISTRICT CONTACTS MEETING, PAR
Payment Amount:		276.96	* Accrued A/P

Pymt # 0010029763
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
MILEAGE REIM	04/01/2026	223.26 10-2269-580-000-00-000-000-012-0000	DISTRICT CONTACTS MEETING, GRA
MILEAGE REIM	05/06/2026	53.70 10-2269-580-000-00-000-000-012-0000	DISTRICT CONTACTS MEETING, PAR
Payment Amount:		276.96	* Accrued A/P

0010029763

07/27/2026

*****276.96

PAY Two Hundred Seventy-Six and 96/100 Dollars

To the Order of:

NON-NEGOTIABLE

AP

EXPENSE FORM

Leighton Area School District

Name: SANDRA MICHALIK
Email: smichalik@leighton.org
Employee ID: 33
Vendor #: N/A

Department: Business Manager
Request Date: 4/1/2026
PO Number: N/A
Deliver To Vendor #: N/A

EXPENSE SUMMARY

Total Miles	333.2200	Description
Mileage Expenses	\$223.26	April 2026
Expenses	\$0.00	
Req. Amount	\$223.26	10-2269-580-000-00-000-000-012-0000

PAID
JUL 27 2026

MILEAGE DETAILS

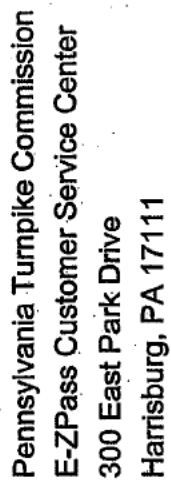
Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
4/1/2026	19.08	\$12.78	\$0.00	Leighton School District, 1000 Union St, Leighton, PA 18235, USA	CLIU, 4210 Independence Dr, Schnecksville, PA 18078, USA	District Contacts Meeting	00-0000-000-000-000-000-0000
4/1/2026	19.08	\$12.78	\$0.00	CLIU, 4210 Independence Dr, Schnecksville, PA 18078, USA	Leighton School District, 1000 Union St, Leighton, PA 18235, USA	District Contacts Meeting (Round Trip)	00-0000-000-000-000-000-0000
4/10/2026	42.50	\$28.48	\$0.00	Leighton School District, 1000 Union St, Leighton, PA 18235, USA	Institute Ln, Kingston, PA 18704, USA	Graham Academy for student observation	00-0000-000-000-000-000-0000

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
4/10/2026	42.50	\$28.48	\$0.00	Institute Ln, Kingston, PA 18704, USA	Leighton School District, 1000 Union St, Leighton, PA 18235, USA	Graham Academy for student observation (Round Trip)	00-0000-000- 000-00-000-000- 000-0000
4/17/2026	19.08	\$12.78	\$0.00	Leighton School District, 1000 Union St, Leighton, PA 18235, USA	CLIU, 4210 Independence Dr, Schnecksville, PA 18078, USA	CLIU for Residency Summit PD	00-0000-000- 000-00-000-000- 000-0000
4/17/2026	19.08	\$12.78	\$0.00	CLIU, 4210 Independence Dr, Schnecksville, PA 18078, USA	Leighton School District, 1000 Union St, Leighton, PA 18235, USA	CLIU for Residency Summit PD (Round Trip)	00-0000-000- 000-00-000-000- 000-0000
4/21/2026	42.50	\$28.48	\$0.00	Leighton School District, 1000 Union St, Leighton, PA 18235, USA	Institute Ln, Kingston, PA 18704, USA	Graham Academy for RR / IEP Meeting	00-0000-000- 000-00-000-000- 000-0000
4/21/2026	42.50	\$28.48	\$0.00	Institute Ln, Kingston, PA 18704, USA	Leighton School District, 1000 Union St, Leighton, PA 18235, USA	Graham Academy for RR / IEP Meeting (Round Trip)	00-0000-000- 000-00-000-000- 000-0000
4/30/2026	43.45	\$29.11	\$0.00	Leighton School District, 1000 Union St, Leighton, PA 18235, USA	1150 Wyoming Ave, Wyoming, PA 18644, USA	New Story School tour and 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
4/30/2026	43.45	\$29.11	\$0.00	1150 Wyoming Ave, Wyoming, PA 18644, USA	Lehigh School District, 1000 Union St, Lehigh, PA 18235, USA	New Story School tour and meeting (Round Trip)	00-0000-000-000-00-000-000-0000

PAID
JUL 27 2026



SANDRA MICHALIK

LEHIGHTON, PA 18235-9611

Account Number: 2783354

Search Filter:

Date Range: 4/10/2026 - 4/30/2026.

[illegible]

PAID
JUL 27 2026

4/10/26 Toll charge \$5.⁰⁰
Graham Academy



Pennsylvania Turnpike Commission
E-ZPass Customer Service Center
300 East Park Drive
Harrisburg, PA 17111

Transactions For:

SANDRA MICHALIK
311 MANOR LNE
LEHIGHTON, PA 18235-9611
Account Number: 2783354

Search Filter:

Date Range: 4/10/2026 - 5/8/2026.

PAID
JUL 27 2026

Post Date	License / State	Entry Date	Entry Interchange	Exit Date	Exit Interchange	Class	Amount	Payment Method	Payment Account Number	Adjusted
05/01/2026				04/30/2026 12:27 PM	A88 N	2L	\$1.08			
05/01/2026				04/30/2026 12:27 PM	A88 N	2L	\$1.72			
04/19/2026				04/30/2026 12:08 PM	A77 N	2L	\$2.08			
04/19/2026				04/18/2026 05:48 PM	A70 N	2L	\$2.45			
04/19/2026				04/18/2026 05:51 PM	A45 N	2L	\$2.01			
04/19/2026				04/18/2026 05:58 PM	A31 N	2L	\$2.08			
04/19/2026				04/18/2026 06:05 PM	A27 N	2L	\$1.54			
04/19/2026				04/18/2026 05:56 PM	T331 E	2L	\$1.55			
04/19/2026				04/18/2026 10:18 AM	T331 W	2L	\$1.55			
04/19/2026				04/18/2026 10:07 AM	A27 S	2L	\$2.08			
04/19/2026				04/18/2026 10:10 AM	A45 S	2L	\$2.01			
04/19/2026				04/18/2026 09:37 AM	A70 S	2L	\$2.45			
04/19/2026				04/18/2026 09:38 AM	A88 N	2L	\$1.54			
04/19/2026				04/18/2026 12:31 PM	A88 N	2L	\$1.72			
04/19/2026				04/18/2026 12:09 PM	A27 N	2L	\$2.08			
04/19/2026							\$31.38	Total Amount		

4/30/26 Toll Charge
New Story \$5.00

48

EXPENSE FORM

Lehigh Area School District

Name: SANDRA MICHALIK
Email: smichalik@lehighton.org
Employee ID: 33
Vendor #: N/A

Department:
Request Date: 5/6/2026
PO Number: N/A
Deliver To Vendor #: N/A
Routing Info: Special Education

Business Manager
 5/6/2026
 N/A
 N/A
 Special Education

EXPENSE SUMMARY

Total Miles	80.1600	Description
Mileage Expenses	\$53.70	May 2026
Expenses	\$0.00	
Req. Amount	\$53.70	10-2269-580-000-000-012-0000

PAID
 JUL 27 2026

MILEAGE DETAILS

Date	Mileage	Mile Amt	Expenses	Travel From	Travel To	Comment	Acct
5/6/2026	19.08	\$12.78	\$0.00	Lehigh Area School District, 1000 Union St, Lehigh, PA 18235, USA	CLIU, 4210 Independence Dr, Schnecksville, PA 18078, USA	District Contacts Meeting	00-0000-000-000-0000-000-0000
5/6/2026	19.08	\$12.78	\$0.00	CLIU, 4210 Independence Dr, Schnecksville, PA 18078, USA	Lehigh Area School District, 1000 Union St, Lehigh, PA 18235, USA	District Contacts Meeting (Round Trip)	00-0000-000-000-0000-000-0000
5/15/2026	21.00	\$14.07	\$0.00	Lehigh Area School District, 1000 Union St, Lehigh, PA 18235, USA	2700 N Cedar Crest Blvd, Allentown, PA 18104, USA	Parkland High School for IEP meeting	00-0000-000-000-0000-000-0000

Vendor: SNYDER 01-Snyder Tire Inc
103 E Penn St LEHIGHTON PA 18235-0000

Pymt # 0010029764
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
87153	06/16/2026	373.80 10-2620-433-000-00-000-000-026-0000	SEMI ANNUAL STATE INSPECTION
87154	06/17/2026	86.42 10-2620-433-000-00-000-000-026-0000	SEMI ANNUAL STATE INSPECTION
87155	06/18/2026	39.00 10-2620-433-000-00-000-000-026-0000	SEMI ANNUAL STATE INSPECTION
87156	06/19/2026	39.00 10-2620-433-000-00-000-000-026-0000	SEMI ANNUAL STATE INSPECTION
Payment Amount:		538.22	* Accrued A/P

Vendor: SNYDER 01-Snyder Tire Inc
103 E Penn St LEHIGHTON PA 18235-0000

Pymt # 0010029764
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
87153	06/16/2026	373.80 10-2620-433-000-00-000-000-026-0000	SEMI ANNUAL STATE INSPECTION
87154	06/17/2026	86.42 10-2620-433-000-00-000-000-026-0000	SEMI ANNUAL STATE INSPECTION
87155	06/18/2026	39.00 10-2620-433-000-00-000-000-026-0000	SEMI ANNUAL STATE INSPECTION
87156	06/19/2026	39.00 10-2620-433-000-00-000-000-026-0000	SEMI ANNUAL STATE INSPECTION
Payment Amount:		538.22	* Accrued A/P

0010029764

07/27/2026

*****538.22

PAY Five Hundred Thirty-Eight and 22/100 Dollars

To the Order of:

Snyder Tire Inc
103 E Penn St
LEHIGHTON PA 18235-0000

NON-NEGOTIABLE

**Snyder Tire Company**

103 East Penn St
Lehigh, PA 18235
6103773336
snydertire@gmail.com

Invoice #87153

Page 1 of 5
06/16/2026 2:09 PM

Lehigh Area School

1000 UNION ST
LEHIGH, PA 18235
gelsasser@lehigh.org
+1 610-377-6180

2016 Ford Transit-150

1FMZK1ZM2GKA32486
Engine: 3.7L V6 (M) 99M
FLEX FI
Plate: MG2936J
Fleet #: 7
Odometer In: 34324
Odometer Out:

Advisor:

Technician: Brandon DeLong

GRAND TOTAL: \$373.80**BALANCE DUE: \$373.80****PAID****JUL 27 2026****SERVICES****1****Semi Annual State Inspection**

-- Technician Notes from AutoVitals SmartFlow --

Notes for 'Perform semi-annual state inspection':

Old 7/26 31667

Tires LF 4 RF 2 LR 7 RR 7

Brakes LF 7 RF 7 LR 4 RR 4

Sticker# si6 0035019

LABOR

Perform semi-annual state inspection

PARTS

SEMI ANNUAL INSPECTION
STICKER

PART #

STK2

QTY

1.0

EACH

\$9.00

TOTAL

\$9.00

SUBTOTAL: \$39.00

Labor: \$30.00

Parts: \$9.00

Fees: \$0.00

Sublet: \$0.00

10-2620-433-000-00-000-000-000-000-000-000

2**Mount & Balance New Tires - 2****LABOR**

Mount and balance two tires. Replace valve stems as necessary. Torque lug nuts to factory spec.
Reset TPMS if necessary

PARTS**TIRES****SIZE****DOT#****PART #****PART #****QTY****QTY****EACH****EACH****TOTAL****TOTAL**

235/65R16C
WRANGLER
WORKHORS
E HT C-TYPE

235/65R16 121R

131195995

2.0

\$140.40

\$280.80

HAZMATS & FEES**QTY****FEE****TOTAL**

Tire Disposal

2.0

\$5.00

\$10.00

DOT #

1.0

\$0.00

\$0.00

2.0

\$10.00

\$20.00

SUBTOTAL: \$334.80

Labor: \$0.00

Parts: \$280.80

Fees: \$54.00

Sublet: \$0.00

**Snyder Tire Company**

103 East Penn St
Lehigh, PA 18235
6103773336
snydertire@gmail.com

Invoice #87154

Page 1 of 4
06/17/2026 2:00 PM

Lehigh Area School
1000 UNION ST
LEHIGH, PA 18235
gelsasser@lehigh.org
+1 610-377-6180

2018 Ford Transit-150
1FMZK1ZM9JKA61460
Engine: 3.7L V6 (M) 99M
FLEX FI
Plate: MG7992K
Fleet #: 6
Odometer In: 25896
Odometer Out:

Advisor:
Technician: Brandon DeLong

GRAND TOTAL: \$86.42**BALANCE DUE: \$86.42****PAID****JUL 27 2026****SERVICES****1****Semi Annual State Inspection**

-- Technician Notes from AutoVitals SmartFlow --

Notes for 'Perform semi-annual state inspection':

Old 6/26 23204

Tires LF 7 RF 7 LR 3 RR 3

Brakes LF 7 RF 7 LR 5 RR 5

Sticker# si6 0035020

LABOR

Perform semi-annual state inspection

PARTS	PART #	QTY	EACH	TOTAL
SEMI ANNUAL INSPECTION STICKER	STK2	1.0	\$9.00	\$9.00

SUBTOTAL: \$39.00

Labor: \$30.00
Parts: \$9.00
Fees: \$0.00
Sublet: \$0.00

2**Replace Engine Air Filter****LABOR**

Replace Air Filter

PARTS	PART #	QTY	EACH	TOTAL
Air Filter	200316	1.0	\$36.37	\$36.37

SUBTOTAL: \$47.42

Labor: \$11.05
Parts: \$36.37
Fees: \$0.00
Sublet: \$0.00

10-2420-433

**Snyder Tire Company**

103 East Penn St
Lehigh, PA 18235
6103773336
snydertire@gmail.com

Invoice #87155

Page 1 of 4
06/18/2026 12:38 PM

Lehigh Area School
1000 UNION ST
LEHIGH, PA 18235
gelsasser@lehigh.org
+1 610-377-6180

2014 Chevrolet Express
3500
1GNZGZBG9E1213281
Engine: 6.0L V8 (G) L96
FLEX FI
Plate: MG4116H
Fleet #: 2
Odometer In: 35763
Odometer Out:

Advisor:

Technician: Brandon DeLong

GRAND TOTAL: \$39.00**BALANCE DUE: \$39.00****SERVICES****1****Semi Annual State Inspection**

-- Technician Notes from AutoVitals SmartFlow --

Notes for 'Perform semi-annual state inspection':

Old 6/26 34222

Tires LF 5 RF 4 LR 11 RR 11

Brakes LF 10 RF 10 LR 10 RR 7

Sticker# si6 0087241

LABOR

Perform semi-annual state inspection

PARTS

SEMI ANNUAL INSPECTION
STICKER

PART #

STK2

QTY

1.0

EACH

\$9.00

TOTAL

\$9.00

PAID

JUL 27 2026

SUBTOTAL: \$39.00

Labor: \$30.00

Parts: \$9.00

Fees: \$0.00

Sublet: \$0.00

16-2420-433-000-00-000-000-026

[Handwritten signature]
6-29-26

Terms of Service:**1. "YES, DO THIS WORK"**

I hereby authorize the corresponding service to be done along with the necessary materials.

2. "YOU MAY DRIVE MY CAR ON PUBLIC ROADS"

Snyder Tire Company staff may operate my vehicle for the purpose of testing, inspection, and delivery.

3. "NO PAYMENT, NO KEYS"

An express lien is acknowledged on my vehicle to secure the amount of services thereto.

4. "ONLINE COMMUNICATION OK"

I welcome email from Snyder Tire Company as a means of receiving copies of my estimate, work order, and invoice.

5. "HERE'S MY SIGNATURE"

I endorse the attached digital image of my signature as equivalent to my written signature and as proof of my agreement to these five terms.

GRAND TOTAL: \$39.00

Total Labor: \$30.00

Total Parts: \$9.00

Total Fees: \$0.00

Total Sublets: \$0.00

Sales Tax: \$0.00

BALANCE DUE: \$39.00**Authorization:**



Snyder Tire Company

103 East Penn St
Lehigh, PA 18235
6103773336
snydertire@gmail.com

Invoice #87156

Page 1 of 4
06/19/2026 11:27 AM

Lehigh Area School

1000 UNION ST
LEHIGH, PA 18235
gelsasser@lehigh.org
+1 610-377-6180

2014 Chevrolet Express 3500

1GNZGZBGXE1210678
Engine: 6.0L V8 (G) L96
FLEX FI
Plate: MG4122H
Fleet #: 1
Odometer In: 43235
Odometer Out:

Advisor:

Technician: Brandon DeLong

GRAND TOTAL: \$39.00

BALANCE DUE: \$39.00

SERVICES

1

Semi Annual State Inspection

-- Technician Notes from AutoVitals SmartFlow --

Notes for 'Perform semi-annual state inspection':

Old 6/26 41395

Tires LF 5 RF 5 LR 8 RR 8

Brakes LF 10 RF 10 LR 10 RR 10

Sticker# si6 0087242

LABOR

Perform semi-annual state inspection

PARTS

SEMI ANNUAL INSPECTION
STICKER

PART

STK2

QTY

1.0

EACH

\$9.00

TOTAL

\$9.00

PAID

JUL 27 2026

SUBTOTAL: \$39.00

Labor: \$30.00

Parts: \$9.00

Fees: \$0.00

Sublet: \$0.00

10-2620-433-000-00-000-000-026

[Handwritten signature]
6/29/26

Terms of Service:

1. "YES, DO THIS WORK"

I hereby authorize the corresponding service to be done along with the necessary materials.

2. "YOU MAY DRIVE MY CAR ON PUBLIC ROADS"

Snyder Tire Company staff may operate my vehicle for the purpose of testing, inspection, and delivery.

3. "NO PAYMENT, NO KEYS"

An express lien is acknowledged on my vehicle to secure the amount of services thereto.

4. "ONLINE COMMUNICATION OK"

I welcome email from Snyder Tire Company as a means of receiving copies of my estimate, work order, and invoice.

5. "HERE'S MY SIGNATURE"

I endorse the attached digital image of my signature as equivalent to my written signature and as proof of my agreement to these five terms.

GRAND TOTAL: \$39.00

Total Labor: \$30.00

Total Parts: \$9.00

Total Fees: \$0.00

Total Sublets: \$0.00

Sales Tax: \$0.00

BALANCE DUE: \$39.00

Authorization:

Vendor: SOCOL-S&O Computers, LLC
125 E White Street SUMMIT HILL PA 18250

Pymt # 0010029765
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
102513	07/05/2026	250.00 10-2818-438-000-00-000-028-000-0000	NO INSURANCE LABOR
102513	07/05/2026	285.00 10-2818-438-000-00-000-028-000-0000	NO INSURANCE PARTS
102513	07/05/2026	150.00 10-0493-LAP-000-00-000-000-000-0000	INSURANCE LABOR
102513	07/05/2026	379.00 10-0493-LAP-000-00-000-000-000-0000	INSURANCE PARTS
Payment Amount:		1064.00	

Vendor: SOCOL-S&O Computers, LLC
125 E White Street SUMMIT HILL PA 18250

Pymt # 0010029765
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
102513	07/05/2026	250.00 10-2818-438-000-00-000-028-000-0000	NO INSURANCE LABOR
102513	07/05/2026	285.00 10-2818-438-000-00-000-028-000-0000	NO INSURANCE PARTS
102513	07/05/2026	150.00 10-0493-LAP-000-00-000-000-000-0000	INSURANCE LABOR
102513	07/05/2026	379.00 10-0493-LAP-000-00-000-000-000-0000	INSURANCE PARTS
Payment Amount:		1064.00	

0010029765

07/27/2026

*****1,064.00

PAY One Thousand Sixty-Four and 00/100 Dollars

To the Order of:

S&O Computers, LLC
125 E White Street
SUMMIT HILL PA 18250

NON-NEGOTIABLE

125 E White St
Summit Hill, PA 18250
www.s-computers.com
570-645-2075



Lehighton School District

Invoice # 102513
Invoice Date 07-05-26
Balance Due \$1,064.00

PAID
JUL 27 2026

Item	Description	Unit Cost	Quantity	Line Total
Residential Labor	Discounted per Contract: Residential Labor	\$25.00	16.0	\$400.00
Chromebook Keyboard	Chromebook Keyboard	\$25.00	6.0	\$150.00
Chromebook LCD Cover	Chromebook LCD Cover	\$40.00	4.0	\$160.00
ChromeBook LCD Bezel	ChromeBook LCD Bezel	\$25.00	2.0	\$50.00
Non Touch ChromeBook Screen	Non Touch ChromeBook Screen	\$60.00	4.0	\$240.00
Chromebook Hinge Set - Dell	Dell Chromebook Hinge Set	\$32.00	2.0	\$64.00

Subtotal \$1,064.00
Tax \$0.00
Invoice Total \$1,064.00
Payments \$0.00
Credits \$0.00
Balance Due \$1,064.00

Dutch Boulette 7/13/26

Invoice Ticket

Ticket Date Thu 07-02-26 10:57 PM
Ticket # 2436
Subject ChromeBook Repairs

Ticket Issue

Initial Issue
Thu 07-02-26 10:57 PM ChromeBook Repairs
John Shemansik

Ticket Comments

Date	Comment
Update Sun 07-05-26 06:15 PM John Shemansik	LASDCB2689 - Reseat Battery Cable LASDCB1273 - Replace Keyboard LASDCB1308 - Replace Keyboard, LCD Cover, Bezel LASDCB1665 - Replace LCD Cover, Hinge LASDCB2722 - Replace Screen LASDCB1637 - Replace Screen LASDCB1200 - Replace Screen LASDCB1721 - Replace Keyboard LASDCB1553 - Replace Screen LASDCB1286 - Replace Keyboard LASDCB0914 - Replace Bezel, LCD Cover LASDCB1257 - Replace Keyboard LASDCB1710 - Reseat Touchpad Cable LASDCB1753 - Replace Keyboard LASDCB2351 - Reseat Touchpad Cable LASDCB1776 - Replace Hinge, LCD Cover

PAID

JUL 27 2026

Initial Issue
Thu 07-02-26 10:57 PM ChromeBook Repairs
John Shemansik

Vendor: SPECIAEDP-Specialized Education of Pennsylvania Inc
PO Box 70023 NEWARK NJ 07101

Pymt # 0010029766
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
INV252172	06/05/2026	13578.50 10-1233-329-000-10-200-000-012-0000	GRAHAM ACADEMY-MAY
INV254676	06/24/2026	3886.00 10-1233-329-000-10-200-000-012-0000	GRAHAM ACADEMY-JUN
INV256267	07/06/2026	5517.00 10-1233-329-000-10-200-000-012-0000	GRAHAM ACADEMY-JUN
Payment Amount:		22981.50	* Accrued A/P

Vendor: SPECIAEDP-Specialized Education of Pennsylv
PO Box 70023 NEWARK NJ 07101

Pymt # 0010029766
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
INV252172	06/05/2026	13578.50 10-1233-329-000-10-200-000-012-0000	GRAHAM ACADEMY-MAY
INV254676	06/24/2026	3886.00 10-1233-329-000-10-200-000-012-0000	GRAHAM ACADEMY-JUN
INV256267	07/06/2026	5517.00 10-1233-329-000-10-200-000-012-0000	GRAHAM ACADEMY-JUN
Payment Amount:		22981.50	* Accrued A/P

0010029766

07/27/2026

*****22,981.50

PAY Twenty-Two Thousand Nine Hundred Eighty-One and 50/100 Dollars

To the Order of:

Specialized Education of Pennsylvania Inc
PO Box 70023
NEWARK NJ 07101

NON-NEGOTIABLE

0101 Specialized Education of Pennsylvania Inc
Specialized Education of Pennsylvania Inc
PO BOX 70023
Newark NJ 07101-3523
United States

AP
Invoice
#INV252172
6/5/2026

Bill To

Lehigh Area School District
1000 Union St.
Lehigh PA 18235
United States

Special Instruction

Lower School

TOTAL

\$13,578.50

Due Date: 7/5/2026

PAID
JUL 27 2026

Payment Terms

Net 30

Due Date

7/5/2026

PO #

May.2026

Service Location

Graham Academy

Service Date

5/31/2026

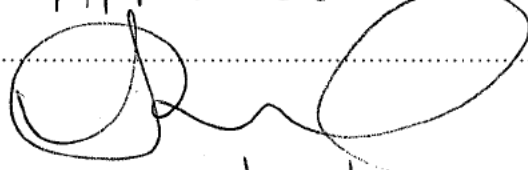
54
5

Quantity	Unit	Item	Last Name	First Name	Unit Price	Amount
20	DAY	S Tuition			\$313.00	\$6,260.00
20	DAY	S 1:1 Aide			\$221.00	\$4,420.00
5.5	HR	S Behavior Specialist			\$139.00	\$764.50
3	HR	S Occupational Therapy			\$162.00	\$486.00
1.5	HR	S Physical Therapy			\$162.00	\$243.00
2.5	HR	S Speech			\$162.00	\$405.00
20	DAY	S Toilet Training			\$50.00	\$1,000.00
	Total	S Subtotal				\$13,578.50

Total \$13,578.50

Amount Paid \$0.00

Amount Due \$13,578.50

Approved

6/22/26

Remittance Slip**Customer**

C3270 10114 - Lehigh Area School District

Invoice #

INV252172

Amount Due

\$13,578.50

Amount Paid**Make Checks Payable To**

Specialized Education of Pennsylvania Inc
PO BOX 70023
Newark NJ 07101-3523
United States



INV252172

6/15/26
mw

0101 Specialized Education of Pennsylvania Inc
Specialized Education of Pennsylvania Inc
PO BOX 70023
Newark NJ 07101-3523
United States

AR
Invoice
#INV254676
6/24/2026

Bill To

Lehigh Area School District
1000 Union St.
Lehigh PA 18235
United States

Special Instruction

Lower School

JUL 27 2026

TOTAL

\$3,886.00

Due Date: 7/24/2026

Payment Terms	Due Date	PO #	Service Location	Service Date
Net 30	7/24/2026	Jun.2026 RSY	Graham Academy	6/8/2026

Quantity	Unit	Item	Unit Price	Amount
6	DAY	S Tuition	\$313.00	\$1,878.00
6	DAY	S 1:1 Aide	\$221.00	\$1,326.00
1	HR	S Behavior Specialist	\$139.00	\$139.00
0.5	HR	S Occupational Therapy	\$162.00	\$81.00
0.5	HR	S Physical Therapy	\$162.00	\$81.00
0.5	HR	S Speech	\$162.00	\$81.00
6	DAY	S Toilet Training	\$50.00	\$300.00
	Total	S Subtotal		\$3,886.00


Approved
6/29/26

Total \$3,886.00
Amount Paid \$0.00
Amount Due \$3,886.00

Customer		Invoice #	Amount Due	Remittance Slip
C3270 10114 - Lehigh Area School District		INV254676	\$3,886.00	Amount Paid

Make Checks Payable To

Specialized Education of Pennsylvania Inc
PO BOX 70023
Newark NJ 07101-3523
United States



INV254676

0101 Specialized Education of Pennsylvania Inc
Specialized Education of Pennsylvania Inc
PO BOX 70023
Newark NJ 07101-3523
United States

PAID

JUL 27 2026

Invoice

#INV256267

7/6/2026

Bill To

Lehigh Area School District
1000 Union St.
Lehigh PA 18235
United States

Special Instruction

Lower School

TOTAL

\$5,517.00

Due Date: 8/5/2026

Payment Terms

Net 30

Due Date

8/5/2026

PO #

Jun.2026 ESY

Service Location

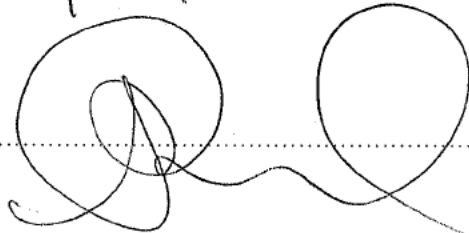
Graham Academy

Service Date

6/30/2026

Quantity	Unit	Item	Last Name	First Name	Unit Price	Amount
10	DAY	S Tuition - ESY			\$202.00	\$2,020.00
10	DAY	S 1:1 Aide			\$221.00	\$2,210.00
1	HR	S Behavior Specialist			\$139.00	\$139.00
1	HR	S Occupational Therapy			\$162.00	\$162.00
1.5	HR	S Physical Therapy			\$162.00	\$243.00
1.5	HR	S Speech			\$162.00	\$243.00
10	DAY	S Toilet Training			\$50.00	\$500.00
	Total	S Subtotal				\$5,517.00

7/15/26 Approved



Total	\$5,517.00
Amount Paid	\$0.00
Amount Due	\$5,517.00

Customer

C3270 10114 - Lehigh Area School District

Invoice #

INV256267

Amount Due

\$5,517.00

Remittance Slip

Amount Paid

Make Checks Payable To

Specialized Education of Pennsylvania Inc
PO BOX 70023
Newark NJ 07101-3523
United States



INV256267

mw
7/8/26

Vendor: SWANK MO-Swank Movie Licensing
2844 Paysphere Circle CHICAGO IL 60674

Pymt # 0010029767
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
INV10110300	06/01/2026	606.34 10-1110-650-000-10-200-000-020-0000	SITE LICENSE EC 2026-2027
INV10110300	06/01/2026	606.33 10-1110-650-000-20-500-000-050-0000	SITE LICENSE MS 2026-2027
INV10110300	06/01/2026	606.33 10-1110-650-000-30-800-000-080-0000	SITE LICENSE HS 2026-2027
Payment Amount:		1819.00	

Vendor: SWANK MO-Swank Movie Licensing
2844 Paysphere Circle CHICAGO IL 60674

Pymt # 0010029767
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
INV10110300	06/01/2026	606.34 10-1110-650-000-10-200-000-020-0000	SITE LICENSE EC 2026-2027
INV10110300	06/01/2026	606.33 10-1110-650-000-20-500-000-050-0000	SITE LICENSE MS 2026-2027
INV10110300	06/01/2026	606.33 10-1110-650-000-30-800-000-080-0000	SITE LICENSE HS 2026-2027
Payment Amount:		1819.00	

0010029767

07/27/2026

*****1,819.00

PAY One Thousand Eight Hundred Nineteen and 00/100 Dollars

To the Order of:

Swank Movie Licensing
2844 Paysphere Circle
CHICAGO IL 60674

NON-NEGOTIABLE

**BILLING INQUIRIES****PHONE**
800.876.5445**EMAIL**
mpbillinginquiries@swank.com**SALES INQUIRIES****PHONE**
877.321.1300**EMAIL**
movielicensing@swankmp.com**INVOICE****PAID**

JUL 27 2026

Date: 6/1/2026
Invoice #: INV10110300

BILL TO		SHIP TO
Matt Lentz Consulting Business Manager Lehigh Area School District 1000 Union St Lehigh PA 18235-1700		Matt Lentz Consulting Business Manager Lehigh Area School District 1000 Union St Lehigh PA 18235-1700
Customer Number	Purchase Order	Federal ID
CUS0024438		43-1382264

DESCRIPTION	LICENSE DATE(S)	AMOUNT
Lehigh Area Elementary School	7/1/2026 - 6/30/2027	
Lehigh Area High School	7/1/2026 - 6/30/2027	
Lehigh Area Middle School	7/1/2026 - 6/30/2027	
	SUBTOTAL	\$1,819.00
	TAX	\$0.00
	SHIPPING/HANDLING	\$0.00
	TOTAL DUE	\$1,819.00
	AMOUNT REMAINING	\$1,819.00

Public Performance Site License to exhibit Motion Pictures legally at your school. A list of the studios covered is listed on the latest copy of your Site License. *CL*

PAYMENT TERMS & OPTIONS

Invoice is due upon receipt. A late payment charge of 1 1/2 % per month will be added to balance unpaid thirty days after invoice date. Thank you!

Electronic Payment

Please call for bank details
800-876-5445

Credit Card

We accept all major credit cards
Visa, MasterCard,
American Express and Discover

Check

Swank Movie Licensing USA
2844 Paysphere Circle
Chicago, IL 60674

Vendor: TamaquaW-Tamaqua Area Wrestling Boosters
500 Penn Street Attn: Jim McCabe TAMAQUA PA 18252

Pymt # 0010029768
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
WRESTLING DUALS	07/07/2026	400.00 10-3250-810-000-30-800-024-000-0000	BOYS WRESTLING DUALS 12/12/26
Payment Amount:		400.00	

Vendor: TamaquaW-Tamaqua Area Wrestling Boosters
500 Penn Street Attn: Jim McCabe TAMAQUA PA 18252

Pymt # 0010029768
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
WRESTLING DUALS	07/07/2026	400.00 10-3250-810-000-30-800-024-000-0000	BOYS WRESTLING DUALS 12/12/26
Payment Amount:		400.00	

0010029768

07/27/2026

*****400.00

PAY Four Hundred and 00/100 Dollars

To the Order of:

Tamaqua Area Wrestling Boosters
500 Penn Street
Attn: Jim McCabe
TAMAQUA PA 18252

NON-NEGOTIABLE

**LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST**

DATE: 7/7/26

PAID

AMOUNT: \$400.00

JUL 27 2026

REQUEST A CHECK FROM 10

FUND PAYABLE TO:

Tamagua Area Wrestling Boosters

REASON: Boys Wrestling Duals

SIGNATURE OF REQUESTOR:

[Signature]

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

[Signature]

ACCOUNT CODE(S):

DEBIT: 10-3250-810-000-30-800-024-000-0000



Kyle Spotts <kspotts@lehighton.org>

Tamaqua HS Boys Wrestling Duals

1 message

Jim McCabe <jmccabe@tamaquasd.org>

Thu, May 7, 2026 at 11:52 AM

To: panczers@bangorsd.org, bhess@berkscatholic.org, Joseph Orlando <jorlando@berwickisd.org>, chunter@cdschools.org, Anthony Melito <amelito@cmvt.us>, Rebecca George <rgeorge@eastpennsd.org>, Scott Buffington <buffingtons@shasd.org>, drother@hanoverarea.net, Dustin McAndrew <dpmcandrew@jtasd.org>, "Kyle Spotts (kspotts@lehighton.org)" <kspotts@lehighton.org>, Eric Moucheron <emoucheron@mabears.net>, Mike Hromyak <mhromyak@tamaquasd.org>, "Ancheff, Benjamin" <bancheff@wvschools.net>, "Oswald, Sarah" <soswald@salisburyisd.org>

I have reached out to the coaches already and here is what I have so far. Below is also the info for next year's tournament. Yellow=confirmed.

2026 confirmed

Abington Heights

Bangor

Berks Catholic

Berwick

Brandywine Heights

Possible

Central Dauphin

Columbia Montour VT

Emmaus

Hanover Area

Jim Thorpe

not attending

Lehighton

Mahanoy Area

Salisbury

not attending

Schuylkill Haven

Spring Ford

Tamaqua

Williams Valley

PAID
JUL 27 2026

*
Pm After July 1st

ENTRY FEE: \$400 payable "Tamaqua Area Wrestling Boosters" --

500 Penn Street, Tamaqua, PA 18252 (Attention Jim McCabe)

DATE: Saturday, December 12, 2026 -- wrestling starts at 9:00 AM (16 teams; 4 pools of 4 and then repool based on record. All #1's together, #2's, etc...)

ADMISSION: Adult \$10 Student \$5 DOORS OPEN 8:00 AM. One ticket good all day (re-entry allowed)

FACILITY: 2 gym, 6 mats (Gyms are close to each other); 6 matches total.

AWARDS: An award will be presented to the champion

Vendor: TIMES N02-Times News
PO Box 239 LEHIGHTON PA 18235

Pymt # 0010029769
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
100579056	06/26/2026	184.15 10-2310-549-000-00-000-000-090-0000	ADVERTISING
100579586	07/14/2026	39.15 10-2310-549-000-00-000-000-090-0000	ADVERTISING
Payment Amount:		223.30	* Accrued A/P

Vendor: TIMES N02-Times News
PO Box 239 LEHIGHTON PA 18235

Pymt # 0010029769
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
100579056	06/26/2026	184.15 10-2310-549-000-00-000-000-090-0000	ADVERTISING
100579586	07/14/2026	39.15 10-2310-549-000-00-000-000-090-0000	ADVERTISING
Payment Amount:		223.30	* Accrued A/P

0010029769

07/27/2026

*****223.30

PAY Two Hundred Twenty-Three and 30/100 Dollars

To the Order of:

Times News
PO Box 239
LEHIGHTON PA 18235

NON-NEGOTIABLE

TIMES NEWS

— MEDIA GROUP —

TIMES NEWS LEHIGH VALLEY PRESS 

P.O. Box 239, Lehigh, PA 18235-0239
1-800-443-0377

ADVERTISING INVOICE

Accounts 30 days or more past due will be assessed
the unpaid balance per month.

ADVERTISER NAME/CLIENT NAME

LEHIGHTON AREA SCHOOL DIST

TOTAL AMOUNT DUE

INVOICE NUMBER

BILLING DATE

\$184.15

100579056-06262026

6/26/2026

PAYMENT TERMS

PAGE #

UPON RECEIPT

1 of 1

OK TO PAY

PAID

JUL 27 2026

LEHIGHTON AREA SCHOOL DIST
1000 UNION ST
ATTN: AMANDA CITRO
LEHIGHTON, PA 18235-1700



10-2310-549-000-00-000-000-090-0000

START	STOP	NEWSPAPER REFERENCE	DESCRIPTION	PRODUCT	SAU SIZE	BILLED UNITS	TIMES RUN	RATE	AMOUNT
06/26	06/26	100579056-06262026	L0032364 - Notice of Special Meeting and Notice of Affidavit	TIMES NEWS	3.00 x 24 Lines	72	1	2.5000	180.00 4.15

We do not refund credits of less than \$5.00, unless your payment method is by credit card. Amounts of \$5.00 or greater will be automatically credited back to the original method of payment.

TOTAL DUE

184.15

Unapplied amounts are included in the total amount due. There is a \$25 charge for returned checks.

▲ KEEP ABOVE PORTION FOR YOUR RECORDS ▲

▼ RETURN THIS PORTION WITH YOUR PAYMENT TO ENSURE PROPER CREDIT ▼

TIMES NEWS

— MEDIA GROUP —

TIMES NEWS LEHIGH VALLEY PRESS 

P.O. Box 239
Lehigh, PA 18235-0239
1-800-443-0377

Invoice Number
Advertiser
Account Number

100579056-06262026
LEHIGHTON AREA SCHOOL DIS
10001687

Invoice Amount
Total Amount Enclosed

184.15

184.15

I am paying by:
Check
(Payable to Times News, LLC)



Name as it appears on Credit Card:

Credit Card Number:

Expiration Date:

Signature: _____

Date: _____

6000579056062620260000000010001687000184150

PROOF OF PUBLICATION

TIMES NEWS
—MEDIA GROUP—

LEHIGHTON, CARBON COUNTY, PENNSYLVANIA
TAMAQUA, SCHUYLKILL COUNTY, PENNSYLVANIA

Commonwealth of Pennsylvania)
) ss.
County of Carbon)

Scott A. Masenheimer, being duly sworn according to law does
depose and say:

1. THAT Times News, LLC is a newspaper of general
circulation published each weekday, except holidays. Its places
of business are Lehigh, Carbon County, Pennsylvania and
Tamaqua, Schuylkill County, Pennsylvania.

2. THAT Times News, LLC was established on May 1, 1967,
as the immediate successor to the Jim Thorpe-News, which was
established on April 1, 1927.

3. THAT the affiant is the Vice President of Operations of
Times News, LLC and as such is authorized by the publisher,
Times News, LLC, to take this affidavit.

4. THAT the affiant is not interested in the subject matter of
the notice or advertising,

5. THAT all of the allegations of this affidavit as to time,
place and character of publication are true.

6. THAT copy of the notice or advertising attached hereto
was printed and published in the regular daily editions and
issues of Times News, LLC on the following dates.

06/26/2026

Scott A. Masenheimer

Sworn to and subscribed before me, this 29th day of
June, A.D. 2026

Jana M Metro

Commonwealth of Pennsylvania-Notary Seal

Jana M Metro, Notary Public
Carbon County

My commission expires November 6, 2027
Commission Number 1231395

PUBLIC NOTICE

**Notice of Special Meeting and Notice of Intent to Adopt
Final Annual 2026-2027 Budget**

As provided in 53 P.S. 6926.311(a) and 24 P.S. §6-687, each board of
school directors is required to adopt a proposed annual budget at least
thirty days prior to adopting that annual budget. In conformity therewith,
notice is hereby given that the Board of School Directors of the Lehigh
Area School District has previously adopted its Proposed Annual Budget
for the 2026-2027 school year at its regularly scheduled meeting held on
May 26, 2026 and now intends to adopt the Annual Budget for the 2026-
2027 school year at a **Special Board Meeting to be held on July 6, 2026
at 7:00 P.M.** in the Administration Building Board's meeting room located
at 1000 Union Street, Lehigh, PA. The purpose of this meeting is to
consider and adopt the annual budget and to address any other matters
before the Board at that time. This meeting is open to the public and all
members of the public are invited and encouraged to attend.

The previously posted Proposed Annual Budget contains estimates of
revenues and expenditures as well as the proposed tax rates for the 2026-
2027 school year. Copies of the Proposed Annual Budget have been and
continue to be available for public inspection on the School District's web-
site ([https://www.lehigh.org/departments/business-office/budgets/2026-
2027-general-fund-budget](https://www.lehigh.org/departments/business-office/budgets/2026-2027-general-fund-budget)) and at the Lehigh Area School District's
business office, 1000 Union Street, Lehigh, PA 18235.
Jun 26

PAID

JUL 27 2026

TIMES NEWS

— MEDIA GROUP —

TIMES NEWS LEHIGH VALLEY PRESS LVP

P.O. Box 239, Lehigh, PA 18235-0239

1-800-443-0377

ADVERTISING INVOICE

Accounts 30 days or more past due will be assessed
5% of the unpaid balance per month.

ADVERTISER NAME/CLIENT NAME

LEHIGHTON AREA SCHOOL DIST

INVOICE NUMBER

BILLING DATE

\$39.15

I00579586-07142026

7/14/2026

PAYMENT TERMS

PAGE #

UPON RECEIPT

1 of 1

OK TODAY

[Handwritten signature]

LEHIGHTON AREA SCHOOL DIST
1000 UNION ST
ATTN: AMANDA CITRO
LEHIGHTON, PA 18235-1700

10-2310-549-000-00-000-000-090-0000

START	STOP	NEWSPAPER REFERENCE	DESCRIPTION	PRODUCT	SAU SIZE	BILLED UNITS	TIMES RUN	RATE	AMOUNT
07/14	07/14	I00579586-07142026	L0032552 - The Lehigh Area School District will Affidavit	TIMES NEWS	2.00 x 7 Lines	14	1	2.5000	35.00 4.15

PAID

JUL 27 2026

We do not refund credits of less than \$5.00, unless your payment method is by credit card. Amounts of \$5.00 or greater will be automatically credited back to the original method of payment.

TOTAL DUE

39.15

Unapplied amounts are included in the total amount due. There is a \$25 charge for returned checks.

▲ KEEP ABOVE PORTION FOR YOUR RECORDS ▲

▼ RETURN THIS PORTION WITH YOUR PAYMENT TO ENSURE PROPER CREDIT ▼

TIMES NEWS

— MEDIA GROUP —

TIMES NEWS LEHIGH VALLEY PRESS LVP

P.O. Box 239

Lehigh, PA 18235-0239

1-800-443-0377

Invoice Number

I00579586-07142026

Advertiser

LEHIGHTON AREA SCHOOL DIS

Account Number

10001687

Invoice Amount

39.15

Total Amount Enclosed

39.15

I am paying by:

Check
(Payable to Times News, LLC)



Name as it appears on Credit Card:

Credit Card Number:

Expiration Date:

Signature: _____

Date: _____

6000579586071420260000000010001687000039159

TIMES NEWS
—MEDIA GROUP—

My commission expires November 6, 2027
Commission Number 1231395

The **Lehigh Area School District** will be holding a Special Board Meeting for hiring personnel on Thursday, July 16, 2026 at 7:30 PM, in the Administration Office Boardroom at 1000 Union Street Lehigh, PA 18235.

JUL 27 2026

Vendor: TN PRIN01-TN Printing
PO Box 239 LEHIGHTON PA 18235

Pynt # 0010029770
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
52145	06/09/2026	896.68 10-2380-610-000-30-800-000-080-0000	GRAD PROGRAM 26
	Payment Amount:	896.68	* Accrued A/P

Vendor: TN PRIN01-TN Printing
PO Box 239 LEHIGHTON PA 18235

Pynt # 0010029770
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
52145	06/09/2026	896.68 10-2380-610-000-30-800-000-080-0000	GRAD PROGRAM 26
	Payment Amount:	896.68	* Accrued A/P

0010029770

07/27/2026

*****896.68

PAY Eight Hundred Ninety-Six and 68/100 Dollars

To the Order of:

TN Printing
PO Box 239
LEHIGHTON PA 18235

NON-NEGOTIABLE



P.O. Box 239
Lehighton PA 18235-0239
610-377-2051

Bill To: 92
LEHIGHTON AREA S.D.
ATTN: BUSINESS OFFICE
1000 UNION ST
LEHIGHTON PA 182351798
USA

Invoice: 52145
Invoice Date: 06/09/2026
Job: 311382
Salesperson: TN Printing
Purchase Order: 2300930

PAID

JUL 27 2026

Qty Shipped	Description	Amount
2,000	Lehighton Grad Program 2026	896.68
Net Sales:		896.68
Invoice Total:		896.68

We continue to see ongoing and significant price increases in all materials related to printing. Those increases will be reflected on your invoice.

Terms: Net Due on Receipt


6/14/27

Please detach stub and return with payment

Please remit payments to:

TN Printing
P.O. Box 239
Lehighton PA 18235-0239
610-377-2051

SOLD TO:

LEHIGHTON AREA S.D.
ATTN: BUSINESS OFFICE
LEHIGHTON PA 182351798

Customer Number: 92

Invoice Date: 06/09/2026

Invoice Number: 52145

Invoice Total: 896.68

For your convenience we accept Visa, MasterCard, Discover and American Express for payment.
If paying with a credit card the transaction will post as TIMES NEWS

Pymt # 0010029771
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
073589	06/05/2026	100.00 10-2620-610-000-20-500-000-026-0000	SHOE REIM 25/26
	Payment Amount:	100.00	* Accrued A/P

Pymt # 0010029771
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
073589	06/05/2026	100.00 10-2620-610-000-20-500-000-026-0000	SHOE REIM 25/26
	Payment Amount:	100.00	* Accrued A/P

0010029771

07/27/2026

*****100.00

PAY One Hundred and 00/100 Dollars

To the Order of:

NON-NEGOTIABLE

**LEHIGHTON AREA SCHOOL DISTRICT
CHECK REQUEST**

DATE: 7/1/24

AMOUNT: \$100.⁰⁰

PAID

JUL 27 2026

REQUEST A CHECK FROM general FUND PAYABLE TO:

[REDACTED]

REASON: Shoe allowance

24/27
5 6

SIGNATURE OF R

SIGNATURE OF B

.....

ACCOUNT CODE(S):

DEBIT: 10-2020-610-000-20-500-026-000-0000

Todd K.

SKECHERS

WHITEHALL SQUARE
2180 MacArthur Road
Whitehall, PA 18052
(610) 432-2617

SALE

PAID

JUL 27 2026

Customer Name: Lname
Customer Number: *****0194

BOGO 50% Off Footwear

ALIZER 5.0 TRAIL- \$86.83

37789NVBK-10H

98739931990 1 @ \$109.99

\$63.15

(\$40.00)

Subtotal \$149.98

Total \$149.98

You Saved \$40.00

Debit \$149.98

Auth. No. 001686

INT: 149.98

IAD: 0110A000002A00000000000000000000FF
TSI: 6800

APPLICATION CRYPTOGRAM: 3088F23BB2DD1D13
APPLICATION PREFERRED NAME:

APPLICATION LABEL: US Debit
Authorized By PIN

Store: 01027 Reg: 01 Tran: 073589
Date: 6/5/2026 6:03:26 PM Assoc: 132650

Item(s) Sold: 2
Item(s) Returned: 0

[Signature]
6-22-26

Vendor: TORCO SUP-Torco Supply Co
800 Interchange Rd LEHIGHTON PA 18235-0000

Pymt # 0010029772
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
TC 117542	06/17/2026	72.00 10-2620-610-000-00-130-000-026-0000	SPOOL HARD FACING, FLUX CORED
TS83702	04/20/2026	84.75 10-1110-610-000-30-800-000-080-0000	ACET 125-150 CU FT TANK
Payment Amount:		156.75	* Accrued A/P

Vendor: TORCO SUP-Torco Supply Co
800 Interchange Rd LEHIGHTON PA 18235-0000

Pymt # 0010029772
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
TC 117542	06/17/2026	72.00 10-2620-610-000-00-130-000-026-0000	SPOOL HARD FACING, FLUX CORED
TS83702	04/20/2026	84.75 10-1110-610-000-30-800-000-080-0000	ACET 125-150 CU FT TANK
Payment Amount:		156.75	* Accrued A/P

0010029772

07/27/2026

*****156.75

PAY One Hundred Fifty-Six and 75/100 Dollars

To the Order of:

Torco Supply Co
800 Interchange Rd
LEHIGHTON PA 18235-0000

NON-NEGOTIABLE

TORCO SUPPLY CO. INC

"The Welding Supply Guys"

800 Interchange Rd., Lehighton, PA 18235

Phone (610) 377-9733 Fax (610) 377-9734

Sold To: 801 82

Ship To: 801

INVOICE

TC 117542

LEHIGHTON AREA SCHOOL DIS
1000 UNION ST
LEHIGHTON, PA 18235

LEHIGHTON AREA SCHOOL DIS
1000 UNION ST
LEHIGHTON, PA 18235

Hardgoods PO #	Gas PO #	Ship Via	Salesman	Terms	Shipped	Ordered
		WILL CALL	HOUSE ACCOUNT	NET 30	6/17/2026	6/17/2026

L	Stock Number	Description	Quantity	Unit	Price	Cylinders Shp	Rtn	Amount
1	55FC-O-.045R1	1# SPOOL HARD FACING FLUX CORED GASLESS MIG WIRE .045	3.00	POUND	24.0000			72.00

PAID
JUL 27 2026

10-2620-610-000-60-10-000-020

6-29-26

Sub Total	Sales 72.00	Delivery Charge	Total	Surcharge	72.00	Sales Tax	Total	Sales Tax	72.00
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TORCO SUPPLY CO. INC

"The Welding Supply Guys"

800 Interchange Rd., Lehigh, PA. 18235

Phone (610) 377-9733 Fax (610) 377-9734

AP

Sold To: 3913

Ship To: 3913

Duplicate Invoice
TS 83702

LEHIGHTON HIGH SCHOOL
1000 UNION ST
LEHIGHTON, PA 18235

PAID
JUL 27 2026

LEHIGHTON HIGH SCHOOL
1000 UNION ST
LEHIGHTON, PA 18235

Hardgoods PO #	Gas PO #	Ship VIA	Salesman	Terms	Date	
		WILL CALL	HOUSE ACCOUNT	NET 30	04/20/2023	
Stock Number	Description	Quantity	Unit	Price	Cylinders Shp Rtn	Amount
1 ACET125	ACET 125-150 CU FT TANK	1.00	CYL	79.7500	1 1	79.75
1 DEL	DELIVERY TO CUSTOMER	1.00	EACH	5.0000		5.00
Sub Total Sales 84.75% Delivery Charge Surcharge Sales Tax Total 84.75						

Rec'd
in mail
6/24/24

[Signature]

Please check your records for this outstanding invoice

[Signature]

Vendor: Vector-Scenario Learning, LLC
PO Box 736512 DALLAS TX 75373

Pymt # 0010029773
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
INV143022	07/01/2026	2650.01 10-2834-650-000-00-000-000-0000	VECTOR TRAINING
Payment Amount:		2650.01	

Vendor: Vector-Scenario Learning, LLC
PO Box 736512 DALLAS TX 75373

Pymt # 0010029773
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
INV143022	07/01/2026	2650.01 10-2834-650-000-00-000-000-0000	VECTOR TRAINING
Payment Amount:		2650.01	

0010029773
07/27/2026

*****2,650.01

PAY Two Thousand Six Hundred Fifty and 01/100 Dollars

To the Order of:
Scenario Learning, LLC
PO Box 736512
DALLAS TX 75373

NON-NEGOTIABLE





Scenario Learning, LLC
4890 W. Kennedy Blvd.
Suite 300
Tampa, FL 33609
866-546-1212 Opt. 2
invoicing@vectorsolutions.com

Invoice

#INV143022

Invoice Date: 7/1/2026

Due Date: 7/31/2026

Bill To
Lehigh Area School District
1000 Union Street
Lehigh PA 18235
United States

PAID

JUL 27 2026

Contract	Customer ID	Salesperson ID	Payment Terms
	0014100001TfzHGAAZ	Daniel Krull	Net 30

Billing Frequency	Billing Start Date	Billing End Date	PO #
Annually	7/1/2026	6/30/2027	

Qty	Item	Rate	Amount
1	SLSST - Vector Training, Employee Safety and Compliance Library SST, 425 users, IU pricing \$5.54/user/yr	2,650.01	\$2,650.01

Subtotal \$2,650.01

Tax (0%) \$0.00

Total \$2,650.01

Balance Due: \$2,650.01

For U.S. customers, Vector is required to collect and remit sales tax in various jurisdictions. Exempt customers should send completed certificates to certs@vectorsolutions.com

For a Copy of our W-9: <https://www.vectorsolutions.com/w9/SLw9-19.pdf>

By remitting payment of this invoice, Customer hereby acknowledges that it has been provided prior notice of, and a reasonable opportunity to review, Vendor's Master Service Agreement. Customer further agrees to be bound by all terms and conditions set forth therein, including those governing the use of Vendor's services and products, available at www.vectorsolutions.com/master-software-as-a-service-agreement/. Copies of the Master Service Agreement are available upon request.

02

Upon expiration of the initial or any Renewal Term of your Client Agreement, access to the Services may remain active for thirty (30) days solely for purpose of Company's record keeping (the "Expiration Period"). Unless otherwise provided in your Client Agreement, any access to or usage of the Services following the Expiration Period shall be deemed Client's renewal of the Agreement under the same terms and conditions.



Scenario Learning, LLC
4890 W. Kennedy Blvd.
Suite 300
Tampa, FL 33609
866-546-1212 Opt. 2
invoicing@vectorsolutions.com

Invoice

#INV143022

Invoice Date: 7/1/2026

Due Date: 7/31/2026

Remittance Information:

Remit Checks To:

Scenario Learning, LLC
PO Box 736512
Dallas, TX 75373-6512

Courier Deposits (FedEx, UPS, etc.):

** Deposits received by courier may not post same day **

JPMorgan Chase (TX1-0029)
Attn: SCENARIO LEARNING, LLC 736512
14800 Frye Road, 2nd Floor
Ft. Worth, TX 76155

Electronic Transfers Only:

JPMorgan Chase
Wire Instructions:
Routing # 021000021
Account # 789086326
SWIFT code CHASUS33
City and State New York, New York

ACH Instructions:

Routing # 072000326
Account # 789086326

If you would like to make a secure online payment via ACH or credit card under \$5,000.00, please use the below link:

[Pay Online Here](#)

PAID

JUL 27 2026

Upon expiration of the initial or any Renewal Term of your Client Agreement, access to the Services may remain active for thirty (30) days solely for purpose of Company's record keeping (the "Expiration Period"). Unless otherwise provided in your Client Agreement, any access to or usage of the Services following the Expiration Period shall be deemed Client's renewal of the Agreement under the same terms and conditions.

Vendor: VERONAS P-Veronas Pizza House
401 Mahoning St LEHIGHTON PA 18235-0000

Pymt # 0010029774
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
39	06/30/2026	60.00 10-2260-635-000-00-000-000-060-0000	CURRICULUM WORK
	Payment Amount:	60.00	* Accrued A/P

Vendor: VERONAS P-Veronas Pizza House
401 Mahoning St LEHIGHTON PA 18235-0000

Pymt # 0010029774
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
39	06/30/2026	60.00 10-2260-635-000-00-000-000-060-0000	CURRICULUM WORK
	Payment Amount:	60.00	* Accrued A/P

0010029774

07/27/2026

*****60.00

PAY Sixty and 00/100 Dollars

To the Order of:

Veronas Pizza House
401 Mahoning St
LEHIGHTON PA 18235-0000

NON-NEGOTIABLE

Verona Pizza House
610-377-2228
401 Mahoning St,
Lehigh, PA 18235

Delivery

Elementary K-2
Lehigh, PA

Server: Jacey C
Check #39
Ordered:

6/29/26 4:43 PM

Small Antipasto Salad	\$8.50
Oil & Vin	
Small Grilled Chicken Salad	\$17.00
Italian	
Br Chk	
Personal Regular Pie Pizza	\$16.00
Buff Chk Pies	\$10.00
Small Grilled Chicken Salad	\$8.50
Honey Mustard	
Br Chk	
orks Plates	\$0.00
Subtotal	\$60.00
Tax	\$3.60
Total	\$63.60

PAID

JUL 27 2026

ON AREA SCHOOL DISTRICT CHECK REQUEST

FROM 10 FUND PAYABLE TO:

PAID

JUL 27 2026

Curriculum Work Participants

REQUESTOR:

SIGNATURE OF PRINCIPAL/DIRECTOR:

SIGNATURE OF BUSINESS ADMINISTRATOR:

ACCOUNT CODE(S): 10-2260-635-000-00-000-000-060-0000

DEBIT:

Pymt # 0010029775
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
5236071	06/26/2026	100.00 10-2620-610-000-10-200-000-026-0000	SHOE REIM 25/26
	Payment Amount:	100.00	* Accrued A/P

Pymt # 0010029775
07/27/2026

Invoice #	Invoice Date PO #	Amount Account Code	Description
5236071	06/26/2026	100.00 10-2620-610-000-10-200-000-026-0000	SHOE REIM 25/26
	Payment Amount:	100.00	* Accrued A/P

0010029775

07/27/2026

*****100.00

PAY One Hundred and 00/100 Dollars

To the Order of:

NON-NEGOTIABLE

AP



W AREA SCHOOL DISTRICT CHECK REQUEST

Mc King Store - Allentown - 872
1828 Airport Rd
Allentown, PA 18109 9734
610-821-8950

Order Number: 5236071
Date: 06/26/26, 06:05 PM
Store: Mc King Store - Allentown - 872
Employee Name: Zolliella

Site

Customer: Red Wing Valued Customer

Item	Price
05007W2105	
CarryOut	
Carbide 05007 array 10.5 W2	\$ 164.99
Quantity:	1
ASTM F2413-18, M/I/C, EH, ASTM F2413-24, I	
/C, EH SR, ASTM F3445-21, SR	
SubTotal:	\$ 164.99
Sales and Use Tax	\$ 0.00

PAID

JUL 27 2026

Subtotal: \$ 164.99
Tax Amount: \$ 0.00
Total: \$ 164.99

Customer Amount Paid:
Credit/Debit (8919) \$ 164.99

M general FUND PAYABLE TO:

lis Hough

allowance

PAID

JUL 27 2026

TOR: [Signature]

SS ADMINISTRATOR: [Signature]

0-610-000-00-000-026-000-0000

ITEM COUNT = 1

