

NCPERS Group Life Ins.  
c/o Member Benefits, Inc.  
PO Box 17605  
Jacksonville, FL 32245



## NCPERS GROUP LIFE INSURANCE MONTHLY BILLING STATEMENT

D03827590000626\_CRE

TWP OF MAHOMET  
ATTN: AARON WHEELER  
704 E FRANKLIN  
PO BOX 492  
MAHOMET IL 61853-0492

Please send payment to:  
NCPERS Group Life Ins.  
c/o Member Benefits  
PO Box 17605  
Jacksonville, FL 32245

INVOICE DATE: JULY 1, 2024

BILLING: 3836082024

PREMIUM FOR MONTH OF: 08/2024

UNIT NUMBER: [REDACTED]

DUE DATE: AUGUST 10, 2024

SYSTEM: IMRF

This statement is for July payroll deductions.  
Premiums are due by the 10th of the Premium Month.

### OPEN INVOICE SUMMARY

Invoice Number	Coverage Period	Total Due	Total Paid	Open Balance
3836072024	7/1/2024 - 7/31/2024	\$32.00	\$0.00	\$32.00
3836082024	8/1/2024 - 8/31/2024	\$32.00	\$0.00	\$32.00
<b>TOT</b>		<b>\$64.00</b>	<b>\$0.00</b>	<b>\$64.00</b>

### **IMPORTANT INFORMATION**

To expedite enrollment changes, please email your changes to [ncpers@memberbenefits.com](mailto:ncpers@memberbenefits.com).  
Access the NCPERS Life Insurance Resource Page at [ncpers.memberbenefits.com/resources](http://ncpers.memberbenefits.com/resources).

### CURRENT CHARGES

CODES: A = Add | T = Terminated Employment | V = Voluntary Cancellation | M = Medical Leave | R = Retired

MEMBER NAME	ID	PREMIUM	CODE	Date Rec:	COMMENT
CHRISTIE, PAUL G	[REDACTED]	\$16.00		Code	5-2420
DOENITZ, CHRIS A	[REDACTED]	\$16.00		Account #	9309
<b>TOT</b>		<b>\$32.00</b>		Amount	<b>16.00</b>

Signature \_\_\_\_\_

### GROUP CONTACT INFORMATION

KEEP MY CURRENT CONTACT INFORMATION

Contact Name: AARON WHEELER

Phone Number: [REDACTED]

Email Address: [REDACTED]

UPDATE MY CONTACT INFORMATION

Contact Name: [REDACTED]

Phone Number: [REDACTED]

Email Address: [REDACTED]





Simply Exceptional Connections  
601 N. Country Fair Dr. | Champaign, IL 61821

Date Rec.

Code

Invoice Date:	Invoice Number:	Due Date:
08/01/2024	INV152339	08/11/2024

5-6070

Account #

Bill To:

Mahomet Township Office  
512 E. Main St  
Mahomet IL 61853  
United States

Amount

184.71

Site Address:

Mahomet Township Office  
512 E. Main St  
Mahomet IL 61853  
United States - Mahomet Township Office

Signature

Description	Quantity	Rate	Amount
Plus 50 50 mbps download/25 mbps upload	1.00	\$ 109.99	\$ 109.99
PBX Base Package	1.00	\$ 15.00	\$ 15.00
PBX Base Package Discount	1.00	\$ -2.25	\$ -2.25
Call Path	1.00	\$ 20.00	\$ 20.00
Call Path Discount	1.00	\$ -3.00	\$ -3.00
Extension	3.00	\$ 10.00	\$ 30.00
Extension Discount	3.00	\$ -1.50	\$ -4.50
Location	1.00	\$ 2.00	\$ 2.00
Location Discount	1.00	\$ -0.30	\$ -0.30
Ported Phone Number	1.00	\$ 3.00	\$ 3.00
Ported Phone Number Discount	1.00	\$ -0.45	\$ -0.45
IL 911 Surcharge	5.00	\$ 1.50	\$ 7.50

**Do you have a question about your bill?**

Call us at 888-799-7249 or email us at AR@PavlovMedia.com

**Other questions?**

Call us at 888-472-8568 or email us at support@pavlovmedia.com

<b>Subtotal</b>	\$ 176.99
<b>Tax</b>	\$ 7.72
<b>Total</b>	\$ 184.71

Customer Name:	Account Number:	Invoice Number:	Invoice Date:	Amount Due:
Mahomet Township Office		INV152339	08/01/2024	\$ 184.71

**Payable To:**

Pavlov Media  
601 N. Country Fair Dr.  
Champaign IL 61821  
United States

**Address Changes or Comments:**



Heart Technologies, Inc.  
3105 N Main Street  
East Peoria, IL 61611  
(309) 427-7000



Bill To:
Mahomet Township Attn: Maintenance Work 512 E. Main Street Mahomet, 61853 United States

Date	Invoice
07/09/2024	71620
Account	MAHTOW

Terms	Due Date	PO Number	Reference	
Net 15 days	07/24/2024		Monthly Billing for July	E99985561

Agreement Type	Quantity	Price	Amount
Agreement Managed Services & Backup (Remote)			\$320.00
RMM Endpoint Agent	2.00	\$0.00	\$0.00
Endpoint Detection & Response	2.00	\$0.00	\$0.00
Secure Internet Gateway & Content Filtering	2.00	\$0.00	\$0.00
Microsoft 365 Account Backup	9.00	\$0.00	\$0.00
Microsoft 365 Advanced Threat Defense	9.00	\$0.00	\$0.00
Managed Backup Service-Datto (Cloud Continuity)	2.00	\$0.00	\$0.00
ThreatLocker Endpoint Security Platform	2.00	\$0.00	\$0.00
<b>Total Agreement Type:</b>			<b>\$320.00</b>
Make checks payable to Heart Technologies, Inc. We accept the following Credit Cards : American Express, Master Card, and Visa. A 4% fee will be charged and collected on all invoices paid by credit card.			
<b>Invoice Subtotal:</b> \$320.00			
<b>Sales Tax:</b> \$0.00			
<b>Invoice Total:</b> <b>\$320.00</b>			
<b>Payments:</b> \$0.00			
<b>Credits:</b> \$0.00			
<b>Balance Due:</b> <b>\$320.00</b>			

Connecting People to Information

Date Rec. \_\_\_\_\_

Code 5-6070

Account # 71620

Amount 320.00

Signature \_\_\_\_\_

Health Alliance  
3310 Fields South Dr.  
Champaign, IL 61822

## Premium Invoice

✉ Sent 07/13/24



Account ID: [REDACTED]

### ✉ Mail to:

Shereth A Doenitz  
125 COUNTY ROAD 2300 N  
MAHOMET IL 61853-8902

INVOICE NUMBER: 45433-022

Current Month Premium:

Previous Balance:

Retro-Active Transactions:

Payment Received:

Current Balance Due:

[REDACTED]  
\$0.00

[REDACTED]

[REDACTED]

Payment due by  
8/1/2024

See following pages for statement details →

### 📞 Questions?

If you would like to speak to a customer service representative, please call (866) 247-3296.

### 💻 To review and pay online:

[www.healthalliance.org](http://www.healthalliance.org)

### ✉ Pay by check:

Make checks payable to Health Alliance Medical Plans

### Important Information

Please do not send messages to Health Alliance with your payment. Payments are processed electronically, and your message will not be received. Instead, please call the number on the back of your ID card or send your message to Health Alliance, 3310 Field South, Champaign, IL 61822.

**Note:** Depending on how you pay your premium, you may be asked to reenter your payment information. If you are currently enrolled in Autopay, no further action is needed.

Date Rec'd \_\_\_\_\_

Code \_\_\_\_\_

5-6535

Acct # \_\_\_\_\_

Amount \$ \_\_\_\_\_

1214,32

*Detach this portion and return with your payment*

AMOUNT ENCLOSED

(Acct) [REDACTED]

Invoice NUMBER: 45433-022

\$

Payment Due

Payment due by 8/1/2024

Signature \_\_\_\_\_



Check #

Shereth A Doenitz

Mail To:

Health Alliance Medical Plans

9865 Reliable Parkway

Chicago, IL 60686-0098

### Current Month Activity

Plan: POS HSA 7100 ELITE BRONZE

Subscriber: Doenitz, Shereh A.

Member/Reason	Relationship	DOB	Member ID	Date	Amount
[REDACTED] Doenitz, Christian A.	Spouse	[REDACTED]	[REDACTED]	08/01/2024	1,214.32
Total: [REDACTED]					



PO BOX 489  
NEWARK, NJ 07101-0489

Manage Your Account <a href="http://b2b.verizonwireless.com">b2b.verizonwireless.com</a>	Account Number	Date Due
Change your address at <a href="http://ssn.verizonenterprise.com">http://ssn.verizonenterprise.com</a>	Invoice Number	9967990115

## Quick Bill Summary

Jun 02 – Jul 01

MAHOMET TOWNSHIP CEMETARY 00376440  
2270 COUNTY ROAD 0 E P103  
MAHOMET, IL 61853-8903

Previous Balance (see back for details)	\$53.58
Payment – Thank You	-\$53.58
<b>Balance Forward</b>	<b>\$0.00</b>
Monthly Charges	\$51.35
Usage and Purchase Charges	
Voice	\$0.00
Messaging	\$0.00
Data	\$0.00
Surcharges and Other Charges & Credits	\$4.77
Taxes, Governmental Surcharges & Fees	\$1.79
<b>Total Current Charges</b>	<b>\$53.61</b>

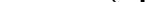
Date Rec. \_\_\_\_\_

Code 8-6040

**Total Charges Due by July 24, 2024** **\$53.61**

**Account #**  7

Amount 53.61 21 by Dave

**Signature** 

**Pay from phone** | **Pay on the Web** | **Questions:**  
#PMT (#768) At [b2b.verizonwireless.com](http://b2b.verizonwireless.com) 1.800.922.0204 or \*611 from your phone



MAHOMET TOWNSHIP CEMETARY  
2270 COUNTY ROAD 0 E  
MAHOMET, IL 61853-8903

Bill Date: July 01, 2024  
Account Number: [REDACTED]  
Invoice Number: 9967990115

### Total Amount Due

Deducted from bank account on 07/21/24  
**DO NOT MAIL PAYMENT**

**\$53,61**

PO BOX 16810  
NEWARK, NJ 07101-6810



Invoice Number	Account Number	Date Due	Page
8867889015		07/24/24	3 of 5

## Overview of Lines

**Summary for Paul Christie:**

**Your Plan**

**4G NW UNL Min&MSG+Email&Data**

\$65.00 monthly charge

Unlimited monthly minutes

**UNL Text Messaging**

Unlimited M2M Text

Unlimited Text Message

**Email & Web Unlimited**

Unlimited monthly gigabyte

**Beginning on 12/12/22:**

**21% Access Discount**

**M2M National Unlimited**

Unlimited monthly Mobile to Mobile

**UNL Night & Weekend Min**

Unlimited monthly OFFPEAK

**UNL Picture/Video MSG**

Unlimited monthly Picture & Video

Have more questions about your charges?  
Get details for usage charges at  
[b2b.verizonwireless.com](http://b2b.verizonwireless.com).

**Monthly Charges**

4G NW UNL Min&MSG+Email&Data	07/02 – 08/01	65.00
21% Access Discount	07/02 – 08/01	-\$13.65
		<b>\$51.35</b>

**Usage and Purchase Charges**

Voice	Allowance	Used	Billable	Cost
Calling Plan (06/02 – 07/01)	minutes	unlimited	224	---
Mobile to Mobile (06/02 – 07/01)	minutes	unlimited	376	---
Night/Weekend (06/02 – 07/01)	minutes	unlimited	68	---
Total Voice				\$0.00

Messaging	Allowance	Used	Billable	Cost
Text (06/02 – 07/01)	messages	unlimited	719	---
Unlimited M2M Text (06/02 – 07/01)	messages	unlimited	810	---
Picture & Video – Sent (06/02 – 07/01)	messages	unlimited	22	---
Picture & Video – Rcv'd (06/02 – 07/01)	messages	unlimited	105	---
Total Messaging				\$0.00

Data	Allowance	Used	Billable	Cost
Gigabyte Usage(06/02 – 07/01)	gigabytes	unlimited	1.148	---
Total Data				\$0.00

**Total Usage and Purchase Charges** **\$0.00**

**Surcharges**

Fed Universal Service Charge	.31
Regulatory Charge	.16
	<b>\$0.47</b>

**Taxes, Governmental Surcharges and Fees**

IL State 911 Fee	.150
IL Telecom Relay Svc Fee	.02
IL State Telecom Excise Tax	.27
	<b>\$1.79</b>

**Total Current Charges for** **\$53.61**



Heart Technologies, Inc.  
3105 N Main Street  
East Peoria, IL 61611  
(309) 427-7000

Bill To:
Mahomet Township Attn: Maintenance Work 512 E. Main Street Mahomet, 61853 United States

Date	Invoice
06/06/2024	70956
Account	MAHTOW

Terms	Due Date	PO Number	Reference	
Net 15 days	06/21/2024		Monthly Billing for June	E99985561

Agreement Type	Quantity	Price	Amount
Agreement Managed Services & Backup (Remote)			\$320.00
RMM Endpoint Agent	2.00	\$0.00	\$0.00
Endpoint Detection & Response	2.00	\$0.00	\$0.00
Secure Internet Gateway & Content Filtering	2.00	\$0.00	\$0.00
Microsoft 365 Account Backup	9.00	\$0.00	\$0.00
Microsoft 365 Advanced Threat Defense	9.00	\$0.00	\$0.00
Managed Backup Service-Datto (Cloud Continuity)	2.00	\$0.00	\$0.00
ThreatLocker Endpoint Security Platform	2.00	\$0.00	\$0.00
<b>Total Agreement Type:</b>			<b>\$320.00</b>

Make checks payable to Heart Technologies, Inc. We accept the following Credit Cards : American Express, Master Card, and Visa. A 4% fee will be charged and collected on all invoices paid by credit card.	<b>Invoice Subtotal:</b>	\$320.00
	<b>Sales Tax:</b>	\$0.00
	<b>Invoice Total:</b>	<b>\$320.00</b>
	<b>Payments:</b>	\$0.00
	<b>Credits:</b>	\$0.00
	<b>Balance Due:</b>	<b>\$320.00</b>

Connecting People to Information

Date Rec. \_\_\_\_\_

Code 5-6070

Account # 70956

Amount 320.

Signature \_\_\_\_\_

Date Rec. \_\_\_\_\_

Code 5-6070

Account # ██████████

Amount 11.79

Signature \_\_\_\_\_

VILLAGE OF MAHOMET 503 E. MAIN STREET P.O. Box 259					First Class Mail US Postage Paid Permit 14
FROM 06/01/2024	TO 06/30/2024	BILLING DATE 08/02/2024	PREV. BALANCE 00	Mahomet ILLINOIS 61853	
SERVICE ADDRESS 512 E MAIN ST					RETURN SERVICE REQUESTED
PREVIOUS READ 810	PRESENT READING 811	USAGE 1	SERVICE WATER SEWER	AMOUNT 5.68 6.11	AMOUNT DUE <b>\$11.79</b>
SIGN-UP FOR DIRECT DEBIT! BRUSH & LIMB COLLECTION - AUGUST 5-9, 2024					ACCOUNT NUMBER <u>██████████</u>
DUE DATE 08/20/2024					AMOUNT DUE <b>\$11.79</b>
PENALTY DATE 8/21/2024					PENALTY BILL <b>22.97</b>
Acct: <u>██████████</u>					RETURN THIS STUB WITH PAYMENT MAHOMET TOWNSHIP 512 E MAIN ST P.O. BOX 492 MAHOMET IL 61853-0492



AmerenIllinois.com  
Customer Service 1.800.232.2477

**Statement Issued** 07/17/2024  
**Amount Due** \$391.26  
**Due Date** Sep 16, 2024

**Account Number** [REDACTED]  
**Customer Name** MAHOMET TOWNSHIP  
**Service Address** 512 E MAIN ST  
MAHOMET, IL 61853

**Last Payment** \$319.50  
*Payment received. Thank you.*

### Current Charge Summary for Statement 07/17/2024

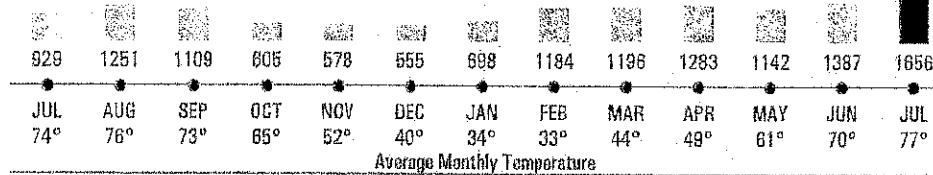
Total Electric Charge	\$334.02
Total Gas Charge	\$57.24
<b>Subtotal Current Charges</b>	<b>\$391.26</b>

**Total Amount Due** \$391.26

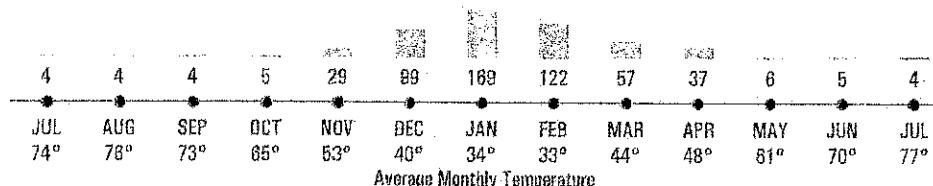
### Important Account Messages

The current billed amount of \$391.26 is due on Sep 16, 2024.

### Electric Usage History in Kilowatt Hours (kWh)



### Gas Usage History in Therms



### Average Daily Electric Use (kWh)

TIME PERIOD	AVG. DAILY USE
CURRENT MONTH	50.18 kWh
LAST MONTH	46.23 kWh
LAST YEAR	30.97 kWh

### Average Daily Gas Use (Therm)

TIME PERIOD	AVG. DAILY USE
CURRENT MONTH	0.12 Therm
LAST MONTH	0.17 Therm
LAST YEAR	0.13 Therm

See page 2 for account messages and tips from Ameren Illinois.

Keep this portion for your records.

Page 1 of 4



Please detach stub and return this portion with your payment.

**Date Rec'd** See reverse side if your address has changed  
and for details on other ways to pay your bill

**Account Number** [REDACTED]

**Code** 5-6070

**Amount Due** \$391.26

**Account #** [REDACTED]

**Due Date** 09/16/2024

**Amount** 391.26

**Amount Enclosed**

**Signature** \_\_\_\_\_

MAHOMET TOWNSHIP  
PO BOX 492  
MAHOMET, IL 61853-0492

AMEREN ILLINOIS  
PO BOX 88034  
CHICAGO IL 60680-1034

00089 2292073 000354 000707 0003/0004  
INTERNAL USE ONLY



Amerenillinois.com  
Customer Service 1.800.232.2477

Statement Issued 07/17/2024  
Amount Due \$391.26  
Due Date Sep 16, 2024

Account Number [REDACTED]  
Customer Name MAHOMET TOWNSHIP  
Service Address 512 E MAIN ST  
MAHOMET, IL 61853

### Payment Details

	DATE	AMOUNT
Payment Received	July 1, 2024	\$319.50

### Electric Service (Non Residential) Billing Detail - Rate Zone III 06/12/2024 - 07/15/2024 (33 days)

#### Electric Meter Read for 06/12/2024 - 07/15/2024 (33 days)

READ TYPE	METER NUMBER	CURRENT METER READ	PREVIOUS METER READ	READ DIFFERENCE	MULTIPLIER	USAGE
Total kWh	72664936	58542.0000 Actual	56886.0000 Actual	1656.0000	1.0000	1656.0000

### Usage Summary

Total kWh	1656.0000	Summer kWh	1656.0000
-----------	-----------	------------	-----------

Electric Delivery	CHARGE DESCRIPTION	USAGE	UNIT	RATE	CHARGE
Ameren Illinois	Customer Charge				\$23.77
DS-2 Small General Delivery Service	Meter Charge				\$7.63
	Distribution Delivery Charge Summer	1,656.00	kWh	@ \$ 0.05743000	\$95.10
	Electric Deferred Income Tax Adjustment	\$121.92		@ -2.730000%	\$-3.33
	Delivery Service Cost Adjustment	\$121.92		@ 9.800000%	\$11.95
				Electric Delivery	\$135.12

Electric Supply	CHARGE DESCRIPTION	USAGE	UNIT	RATE	CHARGE
Ameren Illinois	Purchased Electric Summer	1,656.00	kWh	@ \$ 0.07003000	\$115.97
BGS-2 Basic Generation Service	Purchased Electricity Adjustment	1,656.00	kWh	@ \$-0.00141453	\$-2.34
	Supply Cost Adjustment	1,656.00	kWh	@ \$ 0.00114000	\$1.88
	Transmission Service Charge	1,656.00	kWh	@ \$ 0.02021000	\$33.47
				Electric Supply	\$148.98

State and Local Taxes and Other Mandated Charges	CHARGE DESCRIPTION	USAGE	UNIT	RATE	CHARGE
	Customer Generation Charge				\$1.33
	Clean Energy Assistance Charge	1,656.00	kWh	@ \$ 0.00176000	\$2.91
	Coal to Solar and Energy Storage Charge*	1,656.00	kWh	@ \$ 0.00002000	\$0.03
	Renewable Energy Adjustment*	1,656.00	kWh	@ \$ 0.00458000	\$7.58
	EDT Cost Recovery	1,656.00	kWh	@ \$ 0.00125310	\$2.08
	Electric Environmental Adjustment	1,656.00	kWh	@ \$ 0.00053910	\$0.89
	Energy Efficiency Programs Charge	1,656.00	kWh	@ \$ 0.00617000	\$10.22
	Energy Transition Assistance Charge*	1,656.00	kWh	@ \$ 0.00072000	\$1.19
	Utility-Owned Solar and Storage Adjustment*	1,656.00	kWh	@ \$ 0.00008400	\$0.14
	Mahomet Municipal Tax				\$9.31
	Mahomet Infrastructure Mtce Fee				\$8.78
	Illinois State Electricity Excise Tax				\$5.46
				Total Taxes and Other Charges	\$49.92

\*Includes mandated charges and programs, and other changes resulting from the 2021 state energy law.

Total Electric Charges \$334.02

00059 2292073 000355 000769 00041004



Area Garbage Service

**P. O. Box 408**  
**Mahomet, IL. 61853**

Statement

Date

7/25/2024

217-586-4085

To:
Mahomet Township P. O. Box 492 Mahomet, IL. 61853

Please note if there is a rate increase on your account.

Amount Due	Amount Enc.
\$36.50	

Date	Transaction	Amount	Balance
06/30/2024	Balance forward		0.00
07/01/2024		31.50	31.50
	July --- July \$31.50		
07/16/2024	PMT #9694. On account - Thank you	-31.50	0.00
07/25/2024	2nd quarter billing Thank you --- April, May, June \$36.50	36.50	36.50

**Date Rec.** \_\_\_\_\_

**Code** 5-4070

**Account #** \_\_\_\_\_

**Amount** 36.50

**Signature** \_\_\_\_\_

CURRENT	1-30 DAYS PAST DUE	31-60 DAYS PAST DUE	61-90 DAYS PAST DUE	OVER 90 DAYS PAST DUE	Amount Due
36.50	0.00	0.00	0.00	0.00	\$36.50



FRONTIER

Date Rec. 5-6-071  
 Code 5-6071  
 Account # 112.09  
 Amount 112.09  
 Signature \_\_\_\_\_

## MAHOMET TOWNSHIP

## Your Monthly Invoice

## Account Summary

New Charges Due Date	8/15/24
Billing Date	7/22/24
Account Number	[REDACTED]
PIN	[REDACTED]
Previous Balance	259.68
Payments Received Thru 7/17/24	-259.68
Thank you for your payment!	
Balance Forward	.00
New Charges	112.09
<b>Total Amount Due</b>	<b>\$112.09</b>

[REDACTED]



Date of Bill  
Account Number

7/22/24

## CURRENT BILLING SUMMARY

Local Service from 07/22/24 to 08/21/24

## Qty Description

## Basic Charges

Business Line - Measured  
Carrier Cost Recovery Surcharge  
Multi-Line Federal Subscriber Line Charge  
Access Recovery Charge Multi-Line Business  
Frontier Roadwork Recovery Fee  
Local Measured Service  
IL State & Local Excise Tax  
FTR LD USF Surcharge  
Federal USF Recovery Charge  
IL State 911 Surcharge  
IL Universal Service Fund  
IL Telecom Infrastructure Maint Fee  
IL State Public Utilities Tax  
IL Telecom Relay Surcharge  
IL State Public Utilities Tax-Incremental

## Total Basic Charges

## Non Basic Charges

Federal Primary Carrier Multi Line Charge  
FTR LD USF Surcharge  
IL State & Local Excise Tax  
IL Telecom Infrastructure Maint Fee

## Total Non Basic Charges

## Toll/Other

Frontier Com Online & LD Inc. -Detailed Below  
FTR LD USF Surcharge  
IL State & Local Excise Tax  
IL Telecom Infrastructure Maint Fee  
IL Universal Service Fund

## Total Toll/Other

**TOTAL 112.09**

## MEASURED CALL DETAIL for

## BUS USS CLASS B EAS

Type of Call	Number of Calls	Additional Minutes	Charge
Dial Day	8	76	1.62
Dial Evening			.00
Dial Night	1		.01
		Less Allowance for 30 Days	.00
<b>Subtotal</b>	<b>1.63</b>		

## Detail of Frontier Com Online &amp; LD Inc. Charges

Toll charged to 217/586-1938

Ref #	Date	Time	Min	*Type	Place and Number Called	Charge
1	JUL 11	3:15P	15.0	DS	ST LOUIS MO (314)680-1864	6.00
2	JUL 18	9:51A	2.0	DS	PEORIA IL (309)265-7396	.40
					<b>Subtotal</b>	<b>6.40</b>

## Legend Call Types:

DS - Special

## Caller Summary Report

	Calls	Minutes	Amount
Main Number	2	17	6.40
***Customer Summary	2	17	6.40

## CUSTOMER TALK

If your bill reflects that you owe a Balance Forward, you must make a payment immediately in order to avoid collection activities. You must pay a minimum of \$112.09 by your due date to avoid disconnection of your local service. All other charges should be paid by your due date to keep your account current.

Beginning July 2, 2024, the Federal USF Recovery Charge and the Frontier Long Distance Federal USF Surcharge are increasing from 32.8% to 34.4% of the taxable interstate and international portions of your phone bill. Both charges support the Universal Service Fund, which keeps local phone service affordable for all Americans by providing discounts on services to schools, libraries, and people living in rural and high-cost areas. Visit [frontier.com/regulatory-changes](http://frontier.com/regulatory-changes)





7/13

MAHOMET  
304 E MAIN ST  
MAHOMET, IL 61853-9998  
(800)275-8777

07/10/2024

10:48 AM

Product	Qty	Unit Price
First-Class Mail® Large Envelope	1	\$2.35
Fisher, IL 61843 Weight: 0 lb 4.50 oz Estimated Delivery Date Fri 07/12/2024		
First-Class Mail® Large Envelope	1	\$1.87
Bloomington, IL 61704 Weight: 0 lb 2.20 oz Estimated Delivery Date Fri 07/12/2024		
First-Class Mail® Large Envelope	1	\$1.63
Savoy, IL 61874 Weight: 0 lb 1.90 oz Estimated Delivery Date Fri 07/12/2024		
First-Class Mail® Large Envelope	1	\$1.63
Mahomet, IL 61853 Weight: 0 lb 1.90 oz Estimated Delivery Date Fri 07/12/2024		
First-Class Mail® Large Envelope	1	\$1.63
Mahomet, IL 61853 Weight: 0 lb 1.70 oz Estimated Delivery Date Fri 07/12/2024		
First-Class Mail® Large Envelope	1	\$2.11
Bloomington, IL 61704 Weight: 0 lb 3.10 oz Estimated Delivery Date Fri 07/12/2024		
<b>Grand Total:</b>		<b>\$11.22</b>
Debit Card Remit		\$11.22
Card Name: VTSA		
Account #:		
Approval #: 738304		
Transaction #: 275		
Receipt #: 040289		
Debit Card Purchase: \$11.22		
AID: A0000000980840		
AL: US/DEBIT		
PIN: Verified		

ht  
All  
Refu  
BulK  
notices



**CHIEF COUNTY ASSESSMENT OFFICE**  
CHAMPAIGN COUNTY, ILLINOIS

1776 EAST WASHINGTON STREET  
URBANA, ILLINOIS 61802-4581  
(217) 384-3760 • FAX (217) 384-3762

July 31, 2024

**INVOICE**

**Mahomet**

Postage for Assessor Notices

Total Due **\$78.77**

Please make checks payable to: Champaign County

Please remit by: **August 30 2024**

Date Rec. \_\_\_\_\_

Code **5-6096** \_\_\_\_\_

Account # \_\_\_\_\_

Amount **78.77** \_\_\_\_\_

Signature \_\_\_\_\_



YOUR RECOGNITION HEADQUARTERS  
YOUR RECOGNITION HEADQUARTERS

**TROPHYTIME, INC**  
**223 S Locust St**  
**Champaign, IL 61820**  
**217-351-7958**

## Invoice

Date	Invoice #
7/10/2024	137662

MAHOMET TOWNSHIP  
PO BOX 452  
MAHOMET, IL 61853

Ordered by:

P.O. Number	Terms	Ship
		7/10/2024

John W. T.

visit [www.trophytime.com](http://www.trophytime.com)

Peoria Office  
227 N.E. Jefferson  
Peoria, IL 61602  
Telephone: (309) 674-1133  
Fax: (309) 674-6503



QUINN JOHNSTON

Springfield Office  
400 S. 9th Street, Suite 102  
Springfield, IL 62701  
Telephone: (217) 753-1133  
Fax: (217) 753-1180

July 15, 2024

IRS # [REDACTED]

Mahomet Township  
P.O. Box 492  
Mahomet, IL 91853

Invoice # 215759

Re:Mahomet Township  
Our File No. 900-101900845 - APC

Date Rec. \_\_\_\_\_

Code 5-6120

Account # [REDACTED]

Amount 4811.50

Signature \_\_\_\_\_

For Services Rendered Through July 1, 2024

Fees				Task	Hours	Amount
Date	Atty	Description				
06/11/24	TAE	Review caselaw cited by [REDACTED] attorneys in their response to our Motion to Dismiss in preparation of drafting reply			2.00	340.00
06/12/24	MAK	Review issues for Response to latest [REDACTED] pleading			0.80	160.00
06/14/24	TAE	Continue working on reply to [REDACTED]			1.20	204.00
06/17/24	TAE	Continue working on reply to N [REDACTED]			1.30	221.00
06/18/24	MAK	E-mail from [REDACTED] Counsel - analyze issues to [REDACTED] analyze issues to [REDACTED]			1.40	280.00
06/18/24	TAE	Finalize draft of Reply to [REDACTED] Response to [REDACTED] send to Mike Kraft for review			5.20	884.00
06/19/24	MAK	Draft and revise [REDACTED] review caselaw - analyze and develop arguments for hearing on same			2.80	560.00
06/19/24	MAK	Revise letter to [REDACTED] version of redacted legal invoices - review same			0.70	140.00
06/19/24	TAE	Finalize draft of [REDACTED] with [REDACTED] Documents, prepare and attach exhibits			2.10	357.00
06/20/24	TAE	Final revisions to Reply, file in Champaign County			0.50	85.00
06/21/24	MAK	Email from [REDACTED] Attorney re [REDACTED] - analyze issues for [REDACTED] prior to hearing			0.70	140.00
06/21/24	TAE	Draft response to [REDACTED] FOIA Request, redact invoices			2.00	340.00

PLEASE REMIT PAYMENT TO PEORIA OFFICE

LAW OFFICES OF  
**QUINN JOHNSTON**

I.D. 900-101900845  
Re: Mahomet Township

July 15, 2024  
Invoice 215759  
Page 2

Date	Atty	Description	Task	Hours	Amount
06/25/24	MAK	Review issues for Board Meeting - travel to Mahomet for Board Meeting - meeting with Aaron Wheeler - travel from Mahomet - analyze issues discussed with Aaron		3.30	660.00
06/27/24	TAE	Draft response to [REDACTED]		0.50	85.00
06/27/24	TAE	Redact [REDACTED] website		1.50	255.00
<b>Total Fees</b>					<b>4,711.00</b>

<b>Disbursements</b>					
Date	Description	Task	Units	Rate	Amount
06/25/24	Travel Expenses; Travel - MAK - Mahomet		150	0.67	100.50
<b>Total Disbursements</b>					<b>100.50</b>

<b>Services Summary</b>					
		Hours	Rate	Amount	
Michael A. Kraft	Sr. Partner	9.70	200.00	1,940.00	
Tyler A. Eathington	Associate	16.30	170.00	2,771.00	
<b>Totals</b>		<b>26.00</b>			<b>4,711.00</b>

<b>Total Fees and Costs</b>	<b>4,811.50</b>
<b>Total This Invoice</b>	<b>4,811.50</b>
<b>Total Amount Due</b>	<b>4,811.50</b>

PLEASE REMIT PAYMENT TO PEORIA OFFICE

Mahomet Township Assessor

Mileage Dates

3/11/24      7/8/24

Viewing 143

County 2 @34miles

Other —

Total 211 miles

Date Rec. \_\_\_\_\_

Code 5-6200

Account # W.W. Lindsay Birthright

Amount 141.37

Mature \_\_\_\_\_

**Personal Property Replacement Tax  
Mahomet Township/Library**

Fiscal Year  
2024-2025

Warrant Date	Warrant Amount	Multiplier .3495	Amount to Library	
7/3/2024	1564.02		\$546.62	

7/23/2024

---

Code **5-6480**

---

Account # **Mahomet Public Library District**

---

**\$546.62**

---

Signature

J & N Lawncare and Landscaping, Inc

601 E. Main St. Ste 118  
Mahomet, IL 61853  
217-369-7693

# Invoice

Date	Invoice #
7/30/2024	22996

Bill To
Mahomet Township Cemeteries 521 E. Main St Mahomet, IL 61853

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
1	July mowing	4,202.00	4,202.00
<p>Date Rec. _____</p> <p>Code <u>8-6020</u></p> <p>Account # <u>22996</u></p> <p>Amount <u>4202.</u></p> <p>Signature _____</p>			
<b>Total</b> <b>\$4,202.00</b>			

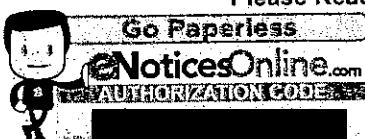
Date Rec. 8-17045  
Code   
Account #   
Amount 2494.58  
Signature

**Champaign County Treasurer  
CASSANDRA JOHNSON  
County Treasurer and Collector  
2023 Real Estate Tax Bill**

MAHOMET TOWNSHIP  
512 E MAIN STREET  
MAHOMET IL 61853-0000

## - Tax Computation + Exemptions

Library Tax	\$0.00
Fair Prop. Value	227,810
Total Value	75,930
HIE Exemption	0
State Multiplier x	1.0000
State Equalized =	75,930
Senior Freeze Expt -	0
Owner Occ. Expt -	0
Senior Expt -	0
Frat. / Vet. Expt -	0
Dis Vet Homestd -	0
Dis Person Expt -	0
Returning Vet Expt -	0
Historical Frz Expt -	0
Natural Disast Expt -	0
Net Taxable Value =	75,930
Tax Rate x	7.1028
EZ Abatement -	0.00
Current Tax =	\$5,393.16
Drainage Assmnt +	\$0.00
Total Tax Due =	\$5,393.16



Please Read: **PAYMENT OPTIONS & ADDITIONAL INFORMATION AVAILABLE ON BACK**

The County Collector only collects your taxes and is not responsible for the amount of your assessment or the amount of your tax bill. We will be happy to assist you or direct you to the proper authority regarding questions about your tax bill.

14893

<b>Owner and Location</b>	MAHOMET TOWNSHIP 504 N LOMBARD ST		
<b>Township</b>	Mahomet	<b>Bill #</b>	2023014893
<b>Tax Code</b>	1501	<b>Use Code</b>	0040
<b>Sec/Twp/Rng</b>	10 20 7		
<b>Lot Number</b>	RIVERSIDE CEMETARY		
S 1/2 OUTLOT B RIVERSIDE CEMETARY			



15-13-10-451-003

MAHOMET TOWNSHIP  
512 E MAIN STREET  
MAHOMET IL 61853-0000

You need  
this for  
Sept 3rd

ON OR BEFORE

Sep 03, 2024

PAY

**2,696.58**

**RETURN THIS  
COUPON WITH YOUR  
PAYMENT**



PIN # 15-13-10-451-003

**\$2,696.58**

### Late Payment Schedule

SEPT 04 THRU OCT 03 2,737.03

OCT 04 THRU OCT 24

Only cashier's checks, money orders,  
or cash will be accepted after

9/30/2023

## 2ND INSTALLMENT

2



AmerenIllinois.com  
Customer Service 1.800.232.2477

Account Number  
Customer Name  
Service Address

MAHOMET TOWNSHIP CEMETE  
502 N LOMBARD ST  
MAHOMET, IL 61853

Statement Issued 07/18/2024  
Amount Due \$78.47  
Due Date Sep 16, 2024  
Last Payment \$73.85  
Payment received. Thank you.

### Current Charge Summary for Statement 07/18/2024

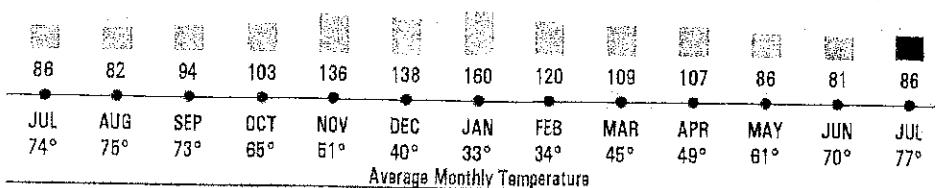
Total Electric Charge	\$78.47
Total Amount Due	\$78.47



### Important Account Messages

The current billed amount of \$78.47 is due on Sep 16, 2024.

### Electric Usage History in Kilowatt Hours (kWh)



### Average Daily Electric Use (kWh)

TIME PERIOD	AVG. DAILY USE
CURRENT MONTH	2.61 kWh
LAST MONTH	2.70 kWh
LAST YEAR	2.69 kWh

B U S I N E S S  
S Y M P O S I U M

### SAVE THE DATE: WEDNESDAY, OCTOBER 16

The 2024 Business Symposium is your one-stop shop for energy efficiency.  
For more information, visit [AmerenIllinoisSavings.com/Symposium](http://AmerenIllinoisSavings.com/Symposium).

68030-13073  
04-160-2292268 008455 016909 00017002  
INTERNAL USE ONLY

Date Rec. \_\_\_\_\_

Code 8-6070

Account # \_\_\_\_\_

Amount 78.47



Signature \_\_\_\_\_

Keep this portion for your records.

Page 1 of 4



Please detach stub and return this portion with your payment.

See reverse side if your address has changed  
and for details on other ways to pay your bill.

Account Number \_\_\_\_\_

Amount Due \$78.47  
Due Date 09/16/2024

Amount Enclosed \_\_\_\_\_



AUTO SCH 5-DIGIT 61853  
MAHOMET TOWNSHIP CEMETE  
PO BOX 492  
MAHOMET, IL 61853-0492

AMEREN ILLINOIS  
PO BOX 88034  
CHICAGO IL 60680-1034



AmerenIllinois.com  
Customer Service 1.800.232.2477

Account Number  
Customer Name  
Service Address

MAHOMET TOWNSHIP CEMETE  
502 N LOMBARD ST  
MAHOMET, IL 61853

Statement Issued 07/18/2024  
Amount Due \$78.47  
Due Date Sep 16, 2024

### Payment Details

	DATE	AMOUNT
Payment Received	July 15, 2024	\$73.85

### Electric Service Non Residential Billing Detail - Rate Zone III 06/13/2024 - 07/16/2024 (33 days)

Electric Meter Read for 06/13/2024 - 07/16/2024 (33 days)

READ TYPE	METER NUMBER	CURRENT METER READ	PREVIOUS METER READ	READ DIFFERENCE	MULTIPLIER	USAGE
Total kWh	71869152	5380.0000 Actual	5294.0000 Actual	86.0000	1.0000	86.0000

### Usage Summary

Total kWh	86.0000 Summer kWh	86.0000
-----------	--------------------	---------

	CHARGE DESCRIPTION	USAGE UNIT	RATE	CHARGE
Electric Delivery	Customer Charge			\$23.77
Ameren Illinois	Meter Charge			\$7.63
DS-2 Small General Delivery Service	Distribution Delivery Charge Summer	86.00 kWh	@ \$ 0.05743000	\$4.94
	Electric Deferred Income Tax Adjustment	\$29.79	@ -2.730000%	\$-0.81
	Delivery Service Cost Adjustment	\$29.79	@ 9.800000%	\$2.92
			Electric Delivery	\$38.45

Electric Supply	Total Energy Charge (\$/kWh)	86.00 kWh	@ \$ 0.09980000	\$8.58
Energy Harbor				
Fixed Rate \$0.0998			Electric Supply	\$8.58

State and Local Taxes and Other Mandated Charges	Customer Generation Charge			\$1.33
	Clean Energy Assistance Charge	86.00 kWh	@ \$ 0.00176000	\$0.15
	Renewable Energy Adjustment*	86.00 kWh	@ \$ 0.00458000	\$0.39
	EDT Cost Recovery	86.00 kWh	@ \$ 0.00125310	\$0.11
	Electric Environmental Adjustment	86.00 kWh	@ \$ 0.00063910	\$0.05
	Energy Efficiency Programs Charge	86.00 kWh	@ \$ 0.00817000	\$0.53
	Energy Transition Assistance Charge*	86.00 kWh	@ \$ 0.00072000	\$0.06
	Utility-Owned Solar and Storage Adjustment*	86.00 kWh	@ \$ 0.00008400	\$0.01
	Illinois State Electricity Excise Tax			\$0.28
			Total Taxes and Other Charges	\$2.91

\*Includes mandated charges and programs, and other changes resulting from the 2021 state energy law.

Total Electric Charges \$49.94

	Details From Your Electric Supplier
Energy Harbor	www.energyharbor.com
	888.254.6359

041602292268 008456 016911 0002/0002





AmerenIllinois.com  
Customer Service 1.800.232.2477

Statement Issued 07/17/2024  
Amount Due \$42.86  
Due Date Sep 16, 2024

Account Number [REDACTED]  
Customer Name MAHOMET TOWNSHIP  
Service Address 203 E DUNBAR ST UNIT 1/2  
MAHOMET, IL 61853

Last Payment \$39.72  
*Payment received. Thank you.*

**Current Charge Summary for Statement 07/17/2024**

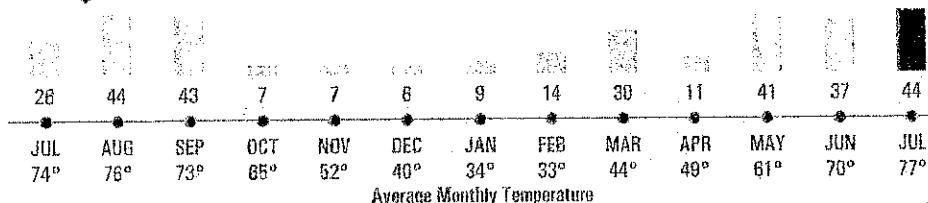
Total Electric Charge	\$42.86
Total Amount Due	\$42.86



**Important Account Messages**

The current billed amount of \$42.86 is due on Sep 16, 2024.

**Electric Usage History in Kilowatt Hours (kWh)**



**Average Daily Electric Use (kWh)**

TIME PERIOD	AVG. DAILY USE
CURRENT MONTH	1.33 kWh
LAST MONTH	1.23 kWh
LAST YEAR	0.87 kWh

**B U S I N E S S  
S Y M P O S I U M**

**SAVE THE DATE: WEDNESDAY, OCTOBER 16**

The 2024 Business Symposium is your one-stop shop for energy efficiency.  
For more information, visit [AmerenIllinoisSavings.com/Symposium](http://AmerenIllinoisSavings.com/Symposium).

68030 13073  
00039 232073 000352 000703 00017004  
INTERNAL USE ONLY

Date Rec. \_\_\_\_\_

Code 8-6070

Account # [REDACTED]

Amount 42.86

Signature \_\_\_\_\_

See page 2 for account messages and tips from Ameren Illinois.

Keep this portion for your records.

Page 1 of 4



Please detach stub and return this portion with your payment.

See reverse side if your address has changed  
and for details on other ways to pay your bill.

Account Number [REDACTED]

Amount Due \$42.86

Due Date 09/16/2024

Amount Enclosed \_\_\_\_\_

Auto Pay

\*\*\*\*\*AUTO\*\*ALL FOR AADC 618  
MAHOMET TOWNSHIP  
PO BOX 492  
MAHOMET, IL 61853-0492

Auto Pay

AMEREN ILLINOIS  
PO BOX 88034  
CHICAGO IL 60680-1034



Amerenillinois.com  
Customer Service 1.800.232.2477

Statement Issued 07/17/2024  
Amount Due \$42.86  
Due Date Sep 16, 2024

Account Number  
Customer Name  
Service Address

MAHOMET TOWNSHIP  
203 E DUNBAR ST UNIT 1/2  
MAHOMET, IL 61853

### Payment Details

	DATE	AMOUNT
Payment Received	June 28, 2024	\$39.72

### Electric Service (Non Residential Billing Detail - Rate Zone III)

06/12/2024 - 07/15/2024 (33 days)

Electric Meter Read for 06/12/2024 - 07/15/2024 (33 days)

READ TYPE	METER NUMBER	CURRENT METER READ	PREVIOUS METER READ	READ DIFFERENCE	MULTIPLIER	USAGE
Total kWh	72551347	2696.0000 Actual	2652.0000 Actual	44.0000	1.0000	44.0000

### Usage Summary

Total kWh	44.0000	Summer kWh	44.0000
-----------	---------	------------	---------

	CHARGE DESCRIPTION	USAGE	UNIT	RATE	CHARGE
Electric Delivery	Customer Charge				\$23.77
Ameren Illinois	Meter Charge				\$7.63
DS-2 Small General Delivery	Distribution Delivery Charge Summer	44.00	kWh	@ \$ 0.05743000	\$2.53
Service	Electric Deferred Income Tax Adjustment	\$27.33		@ -2.730000%	\$0.75
	Delivery Service Cost Adjustment	\$27.33		@ 9.800000%	\$2.68
				Electric Delivery	\$35.86

Electric Supply	Total Energy Charge (\$/kWh)	44.00	kWh	@ \$ 0.09960000	\$4.38
Energy Harbor					
Fixed Rate \$0.0996				Electric Supply	\$4.38

State and Local Taxes and Other Mandated Charges	Customer Generation Charge				\$1.33
	Clean Energy Assistance Charge	44.00	kWh	@ \$ 0.00176000	\$0.08
	Renewable Energy Adjustment*	44.00	kWh	@ \$ 0.00458000	\$0.20
	EDT Cost Recovery	44.00	kWh	@ \$ 0.00125310	\$0.06
	Electric Environmental Adjustment	44.00	kWh	@ \$ 0.00053910	\$0.02
	Energy Efficiency Programs Charge	44.00	kWh	@ \$ 0.000617000	\$0.27
	Energy Transition Assistance Charge*	44.00	kWh	@ \$ 0.00072000	\$0.03
	Mahomet Municipal Tax				\$0.25
	Mahomet Infrastructure Mtce Fee				\$0.23
	Illinois State Electricity Excise Tax				\$0.15
				Total Taxes and Other Charges	\$2.62

\*Includes mandated charges and programs, and other changes resulting from the 2021 state energy law.

Total Electric Charges \$42.86

000892292073 000353 000705 00020004



### Details From Your Electric Supplier

Energy Harbor  
www.energyharbor.com  
888.254.6359