



PROGRESSIVE WASTE SOLUTIONS OF FL, INC.
 ORLANDO HAULING
 1099 MILLER DRIVE
 ALTAMONTE SPRINGS FL 32701

3001441

Batch _____
 Page 1 of 1
 Doc 740071

For invoice inquiries, call: 407-831-1539
 Customer No.: 0060-003060

INVOICE

SERVICE DATE	CODE	DESCRIPTION	REFERENCE	QUANTITY	AMOUNT
		Balance Forward			420.39
		Payments			420.39
		Adjustments			0.00
		Invoices			0.00
	(0001)	SANLANDO UTILITIES-255101			
		125 WESTERN FORK RD LONGWOOD, FL			
12/25/15	10 6.00YD	Basic Service Charge		1.00	345.24
		1/1/2016-1/31/2016			
12/25/15	10 6.00YD	Administration Fee		1.00	6.00
		1/1/2016-1/31/2016			
12/25/15	10	Fuel Surcharge		2.00	30.21
12/25/15	20	Environmental Surcharge		2.00	35.12
		Site Total			416.57

Account	Invoice Date 12/25/2015	Invoice # 0000993393	Reference S062900	Total This Invoice \$416.57	
Status	Current \$416.57	31 - 60 Days \$0.00	61 - 90 Days \$0.00	Over 90 Days \$0.00	Total Account Balance \$416.57

RECEIVED
JAN 07 2014



Remarks:
 EARN A \$25 CREDIT FOR EACH NEW SIGNED CUSTOMER REFERRED BY YOUR COMPANY! PAYMENT DUE UPON RECEIPT. SERVICES MAY REFLECT A SLIGHT PERIODIC PRICE INCREASE.

Did you know that you can pay your invoice online? Please visit www.wasteservicesinc.com and click on the "Online Bill Payment" menu option to pay your invoice online.

**** To avoid late fees, payment must be posted to your account within 30 days of your invoice date. ****

Bank returned checks will be electronically re-presented to your bank and you may be responsible for a resulting processing fee.

PLEASE RETURN THIS PORTION WITH PAYMENT. DO NOT ATTACH CHECK TO STUB.

SEQ 0003655



PROGRESSIVE WASTE SOLUTIONS OF FL, INC.
 ORLANDO HAULING
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 ALTAMONTE SPRINGS FL 32701

ADDRESS SERVICE REQUESTED

To ensure proper credit, please include customer number on check.

*** DUE UPON RECEIPT ***

0003621 01 SP 0.500 **SNGLP TO 0 1211 60062-



UTILITIES INC
 2335 SANDER RD
 ATTN: ACCOUNTS PAYABLE
 NORTHBROOK,IL 60062-6108

IF PAYING BY MASTERCARD, DISCOVER, VISA OR AMERICAN EXPRESS, FILL OUT BELOW.		
CHECK CARD USING FOR PAYMENT		
<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> DISCOVER	<input type="checkbox"/> VISA
CARD NUMBER		SIGNATURE CODE
SIGNATURE		EXP. DATE
INVOICE DATE 12/25/2015	PAY THIS AMOUNT \$416.57	CUSTOMER # 0060-003060
INVOICE NO. 0000993393	AMOUNT PAID	CHECK NUMBER



PROGRESSIVE WASTE SOLUTIONS OF FL, INC.
 PO BOX 6418
 CAROL STREAM IL 60197-6418

0060000306000002000004165700000416570000993393