

THANK YOU FOR SHOPPING AT  
ACE ON FRANCIS #14757  
(509) 325-0555

ALL SALES FINAL ON RED TAG MERCHANDISE.  
30 DAY RETURN POLICY. RECEIPT REQUIRED  
09/21/24 4:16PM AROB14 573 SALE

5795356 1 EA \$99.99 EA \$  
CART W/CUTBRD 3TIER \$99.99  
9269862 1 EA .01 EA \*N  
CMN RND UP DONATION \$.01

SUB-TOTAL: \$ 100.00 TAX: \$ 9.00  
TOTAL: \$ 109.00  
DB AMT: \$ 109.00

DEBIT/ATM: \$ 109.00  
DEBIT/ATM: XXXXXXXXXXXX9257  
MID:\*\*\*\*\*9882 TID:\*\*\*4682  
AUTH: 001326 AMT: \$ 109.00  
Debit network id:106  
Host reference #:099068 Bat#  
Trace# 605361

Authorizing Network: PAVD

Chip Read  
CARD TYPE: DEBIT EXPR: XXXX  
AID : A0000000980840  
TVR : 8080048000  
IAD : 0601120360A000  
TSI : 6800  
ARC : 00  
MODE : Issuer  
CVM : Verified by PIN  
Name : US DEBIT  
ATC : 00AF  
AC : 0FD4EB353D39498A



10/25/24

#631  
CAC - BBQ  
Diana Kenworthy  
\$320.00 JP.

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ACE ON FRANCIS #14757  
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ALL SALES FINAL ON RED TAG MERCHANDISE.  
30 DAY RETURN POLICY. RECEIPT REQUIRED  
09/18/24 1:00PM CFOLC1 569 SALE

8023375 1 EA \$169.99 EA \*  
GRIDDLE TABLE TOP 22" \$169.99  
8250847 2 EA \$12.99 EA  
PROPANE FUEL 16OZ 2PK \$25.98

SUB-TOTAL: \$ 195.97 TAX: \$ 17.64  
TOTAL: \$ 213.61  
BC AMT: \$ 213.61

BR CARD#: XXXXXXXXXXXX1463  
MID:\*\*\*\*\*9882 TID:\*\*\*4682  
AUTH: 33730C AMT: \$ 213.61  
Host reference #:097854 bat#

Authorizing Network: VISA

Chip Read  
CARD TYPE: VISA EXPR: XXXX  
AID : A0000000031010  
TVR : 808008000  
IAD : 0601120360A000  
TSI : 6800  
ARC : 00  
MODE : Issuer  
CVM :  
Name : VISA CREDIT  
ATC : 009F  
AC : 080907342C0920FD  
TxnID/ValCode: 603301

Bank card USD\$ 213.61



Barbeque  
for the  
Community

American On-Site Services - Portable Toilets  
3808 N Sullivan Rd  
BLDG 107A  
Spokane Valley, WA 99216  
(509) 244-8404  
judy@americanonsite.net



*CK # 630  
173.61  
8/24/24 to 9/12/24  
J.P.  
Sept 19, 2024*

**Invoice To:**

REFLECTION LAKE COMM  
ASSOC  
37708 SHEETS LANE  
ELK, WA 99009

Invoice # 142008  
Invoice Date Sep 11, 2024  
Billing Period --  
Due Date Oct 11, 2024

Invoice Amount **\$173.61**

Customer ID <b>C11811</b>	PO # ---	Rental # <b>R4408</b>	Pay Online ID HSCS15HR	Clerk <b>LH</b>	Terms <b>NET 30 DAYS</b>
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Site: 37708 North Sheets Road, 37708 North Sheets Road Elk, WA 99009

Line #	Service	Rate	Qty.	Amount	Tax	Tax Line	Amount with tax
1	Construction Unit <small>(8/24/2024 - 9/10/2024) C UNIT - Construction Unit</small>	\$125.00	1.286	\$160.75			\$160.75
2	Damage Waiver <small>(8/24/2024 - 9/10/2024) C UNIT</small>	\$10.00	1.286	\$12.86			\$12.86

Invoice Subtotal (Services + Surcharges) **\$173.61**  
Invoice Total **\$173.61**

**Thank you!**

To pay securely online, go to [app.servicecore.com/payment](http://app.servicecore.com/payment). Enter your Customer ID: C11811 and your Pay Online ID: HSCS15HR then click Submit. Enter your payment info and click Pay - That's it!

Dear Valued Customer,

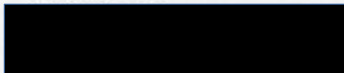
HOW ARE WE DOING?! PLEASE LEAVE US A REVIEW ON GOOGLE, YELP, AND FACEBOOK. WE APPRECIATE YOUR BUSINESS!

We offer a damage waiver on all monthly rental portable toilet equipment. You are charged \$10 per piece of equipment for 28 days. This covers a multitude of costs including tip overs, replacement of any parts due to normal wear and tear, vandalism, and natural weather occurrences. If the equipment is deemed a complete loss the customer shall pay a \$100 deductible for regular units and \$250 for specialty items. If you decline the damage waiver it is the customers responsibility to pay the full cost of the unit or for any repairs. The damage waiver does not cover stolen items, nor does it cover any damages that occur due to misuse of the equipment or poor handling, and it is the customers responsibility to pay full cost of the unit.

We do not offer a damage waiver for event portable toilet equipment. It is the customers responsibility to reimburse American On-Site for damage to any equipment rented apart from normal wear and tear.

Law Offices of  
**Talmadge/Fitzpatrick**  
2775 Harbor Avenue SW, 3rd Fl  
Seattle, WA 98126  
(206) 574-6661 (206) 575-1397 Fax

## Invoice

Rick Smith  


1824.21

Date: 9/3/2024

Invoice Number: 17254

91-2104980

RE: *RLCA*

Date	Item	Description	Hours	Rate	Amount
8/26/2024	PT Fees	Review COA mandate, commissioner's ruling on fees; conference with A. Orheim re: same.	0.1	550.00	55.00
8/30/2024	AO Fees	Review email from trial court for judgment presentation and emails with legal team re: same.	0.2	400.00	80.00

*CK # 625  
Power's Legal fees  
Sept 5, 2024  
J.P.*

Payments are due upon receipt. Unpaid balances over 30 days will be assessed a 12% per annum (1% per month) finance charge.

**Total:** \$135.00

Payments/Credits \$0.00

**Balance Due This Invoice:** \$135.00

**PAINE  HAMBLEN**  
ATTORNEYS

September 2, 2024

Reflection Lake Community Association  
37516 N. Lakeside Dr.  
Elk, WA 99009

Invoice #: 420706  
Client #: 44269  
Matter #: 00001  
Atty: Paul S. Stewart

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**INVOICE SUMMARY**

For professional services rendered and costs advanced through August 31, 2024:

**RE: Derivative Demand**

Professional Services	\$ 650.00
Total Costs Advanced	<u>    .00</u>
<b>TOTAL THIS INVOICE</b>	<b>\$ 650.00</b>

CK # 629  
Sept. 12, 2024  
Lee v. RLCA  
P.