

INVOICE

Customer ID:

Customer Name: Service Period: Invoice Date: Invoice Number:

2-80455-83001

CONFI INSURANCE GROUP 07/01/22-07/31/22 06/30/2022 1743948-4936-1

How To Contact Us

Visit wm.com

To setup your online profile, sign up for paperless statements, manage your account, view holiday schedules, pay your invoice or schedule a pickup







Customer Service: (866) 570-4702

Your Payment is Due

Jul 30, 2022

If full payment of the invoiced amount is not received within your contractual terms, you may be charged a monthly late charge of 2.5% of the unpaid amount, with a minimum monthly charge of \$5, or such late charge allowed under applicable law, regulation or contract.

Your Total Due

\$440.66

If payment is received after 07/30/2022: **\$ 451.68**

Previous Balance

299.09

Payments

(299.09)

+

Adjustments

+

Current Invoice Charges 440.66 Total Account Balance Due

440.66

DETAILS OF SERVICE

Details for Service Location:

LND Insure One, 16837 Torrence Ave, Lansing IL 60438-6019

Customer ID:	2-80433-83001

Description	Date	Ticket	Quantity	Amount
2 YD FEL	07/01/22		1.00	266.69
FUEL/ENVIRONMENTAL CHARGE				158.66
REGULATORY COST RECOVERY CHRG				15.31
Total Current Charges				440.66

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WASTE MANAGEMENT OF ILLINOIS, INC. IL SOUTH PO BOX 42390 PHOENIX, AZ 85080 (866) 570-4702

Invoice Date	Invoice Number	Customer ID (Include with your payment)
06/30/2022	1743948-4936-1	2-80455-83001
Payment Terms	Total Due	Amount
Total Due by 07/30/2022	\$440.66	
If Received after 07/30/2022	\$451.68	

*** DO NOT PAY-AUTOMATIC PAYMENT WILL BE PROCESSED ***

Your bank account will be drafted \$440.66.

4936000028045583001017439480000004406600000044066 5

12007C35

CONFI INSURANCE GROUP 7711 CENTER AVE STE 200 7711 CENTER AVE STE 200 HUNTINGTON BEACH CA 92647 Remit To: WM CORPORATE SERVICES, INC.
AS PAYMENT AGENT
PO BOX 4648
CAROL STREAM, IL 60197-4648



170-0006153-4936-2

5 EASY WAYS TO PAY



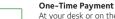
Automatic Payment

Set up recurring payments with us at wm.com/myaccount.



Pay Through Your Financial Institution

Make a payment from your financial institution using your Customer ID.



At your desk or on the go, use wm.com or our WM mobile app for a quick and easy payment.



Pay by Phone

Payable 24/7 using our automated system at 866-964-2729.



Mail it

Write it, stuff it, stamp it, mail it. Envelope provided.



States the date payment is due to Waste
Management. Anything beyond that date may
incur additional charges. Your **Total Due** is the
total amount of current charges and any
previous unpaid balances combined.

previous invoice. We subtract any **Payments Received/Adjustments** and add your **Current Charges** from this billing cycle to get a **Total Due** on this invoice. If you have not paid all or a portion of your previous

Previous balance is the total due from your

balance, please pay the entire **Total Due** to avoid a late charge or service interruption.

Service location details the total current

charges of this invoice.



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Scan to enroll in AutoPay & Paperless Billing, manage your services, view your pick up schedule and see your pick up ETA, all in one place. Scan the QR code to get started today!



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If your service is suspended for non-payment, you may be charged a Resume charge to restart your service. For each returned check, a charge will be assessed on your next invoice equal to the maximum amount permitted by applicable state law.

☐ Check Here to Change Contact Info	☐ Check Here t	o Sign Up for Automatic Payment Enrollment		
List your new billing information below. For a change of service address please contact WM .	deducting money fro	If I enroll in Automatic Payment services, I authorize WM to pay my invoice by electronically deducting money from my bank account. I can cancel authorization by notifying WM at		
Address 1	,	wm.com or by calling the customer service number listed on my invoice. Your enrollment could take 1-2 billing cycles for Automatic Payments to take effect. Continue to submit		
Address 2	payment until page one of your invoice reflects that your payment will be deducted.			
City	1			
State	Email			
Zip	Date			
Email	Bank Account			
Date Valid	Holder Signature			

NOTICE: By sending your check, you are authorizing the Company to use information on your check to make a one-time electronic debit to your account at the financial institution indicated on your check. The electronic debit will be for the amount of your check and may occur as soon as the same day we receive your check.

In order for us to service your account or to collect any amounts you may owe (for non-marketing or solicitation purposes), we may contact you by telephone at any telephone number that you provided in connection with your account, including wireless telephone numbers, which could result in charges to you. Methods of contact may include text messages and using pre-recorded/artificial voice messages and/or use of an automatic dialing device, as applicable. We may also contact you by email or other methods as provided in our contract.