

INVOICE

Customer ID:

Customer Name:

Service Period:

Invoice Number:

Invoice Date:

18-27784-23003

WORTH COMMERCIAL C/O SUNDANCE DISPOSAL 02/01/20-02/29/20 01/24/2020 2404115-2165-3

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: (800) 800-5804

Your Payment Is Due

Mar 09, 2020

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

\$187.84

If payment is received after 03/09/2020: **\$ 192.84**

See Reverse for Important Messages

Previous Balance

187.84

Payments

(93.92)

Adjustments

+

0.00

+

Current Charges 93.92

Customer ID:

1 = [

18-27784-23003

Total Due

Details for Service Location:

Worth Commercial, 3750 S University Dr, Fort Worth TX 76109-3795

Description Date **Ticket** Quantity **Amount** Lock 02/01/20 1.00 11.14 02/01/20 1.00 6 Yard dumpster service 66.64 Environmental charge 11.67 Fort worth franchise 5.00% 4.47 **Total Current Charges** 93.92

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WASTE MANAGEMENT OF TEXAS, INC.

PO BOX 43350 PHOENIX, AZ 85080 (800) 800-5804 (972) 315-5400 (214) 626-8894 FAX

| Invoice Date | Invoice Number | Customer ID (Include with your payment) | | | |
|---|----------------------|---|--|--|--|
| 01/24/2020 | 2404115-2165-3 | 18-27784-23003 | | | |
| Payment Terms | Total Due | Amount | | | |
| Total Due by 03/09/2020 If Received after 03/09/2020 | \$187.84 \$192.84 | | | | |

2165000182778423003024041150000000939200000018784 1

------ Please detach and send the lower portion with payment --- (no cash or staples) ---------

10007C42

WORTH COMMERCIAL C/O SUNDANCE DISPOSAL 3000 S HULEN ST STE 124-222 FORT WORTH TX 76109-1929

Remit To: WM CORPORATE SERVICES, INC.
AS PAYMENT AGENT
PO BOX 660345
DALLAS, TX 75266-0345

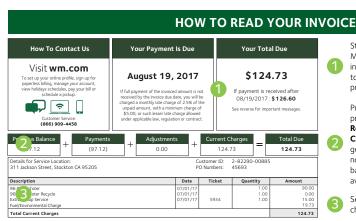
65-0932236-2165-2

IMPORTANT MESSAGES

In order to serve you better, we are simplifying our invoicing process. That is, our invoices will now reflect the Waste Management Legal Entity associated with the business providing your services. The legal entity is shown on the return address of the remittance coupon included on the first page of your invoice. Although your invoice may not include the Doing Business As (DBA) name you have seen in the past, please rest assured that you will continue to receive the same great service from your local Waste Management team. Also for your convenience, we have attached a representative Internal Revenue Service Form W-9, Request for Taxpayer Identification and Certification. The attached W-9 contains correct and accurate information for your true service provider, certified by a member of our Tax Department. Please note that the Form W-9 reflects the corporate office address of the legal entity in accordance with the Internal Revenue Service Instructions. The Remittance Coupon also includes a new "pay-to" entity, WM Corporate Services, Inc. as Payment Agent that will be used throughout most Waste Management Companies. If you have locations in different parts of the country, you may notice different remit to addresses based on your service location. These remittance locations have been selected to expedite the receipt and posting of your payments to minimize the risk of service interruption. We recognize that these changes may require updates to your Accounts Payable records so we will continue to process payments made to previous Waste Management business but we ask that you implement these changes to your systems over the next 60 to 90 days. Thank you for your continued business!

SEASY 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. One-Time Payment 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.



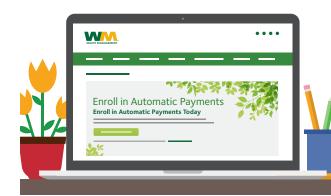
States the date payment is due to Waste Management. Anything beyond that date may incur additional charges. Your **Total Due** is the total amount of current charges and any previous unpaid balances combined.

Previous balance is the total due from your

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
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.



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

www.wm.com/autopay



Automatic Payments

Simplify your life with easy and reliable automatic payments. Save time, prevent late charges and help the environment, too. Get started by visiting wm.com/autopay.

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 TO SIGN UP FOR AUTOMATIC PAYMENT ENROLLMENT | | | | | | |
|--|--|---|--|--|--|--|--|--|
| List your new billing information below. For a change of service address, please contact Waste Management. | | If I enroll in Automatic Payment services, I authorize Waste Management to pay my invoice by electronically deducting money from my bank account. I can cancel authorization by notifying Waste Management at wm.com or by calling the customer service number listed on my invoice. Your enrollment could take 1-2 | | | | | | |
| Address 1 | | billing cycles for Automatic Payments to take effect. Continue to submit payment until page one of your invoice reflects that your payment will be deducted. | | | | | | |
| Address 2 | | | | | | | | |
| City | | | | | | | | |
| State | | | | | | | | |
| Zip | | Email Address | | | | | | |
| Email | | Date | | | | | | |
| Date Valid | | Bank Account 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.

Form W=9
(Rev. October 2018)
Department of the Treasur
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

| | Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Waste Management of Texas, Inc. | | | | | | | | | | |
|--|---|--------------------------------|---------|----------|--|--------------------|----------------------------|-------------|----------|--------|--|
| | 2 Business name/disregarded entity name, if different from above | | | | | | | | | | |
| e. ns on page 3. | Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. | | | | 4 Exemptions (codes apply certain entities, not individuinstructions on page 3): | | | | | | |
| | Individual/sole proprietor or X C Corporation S Corporation Partnership Trust/estate | | | | | | Exempt payee code (if any) | | | | |
| Print or type. See Specific Instructions on page | Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. | | | | Exemption from FATCA reporting code (if | | | | | | |
| beci | Other (see instructions) | | | (App | lies to a | ccoun | ts maint | ained outsi | le the L | J.S.) | |
| See S | 5 Address (number, street, and apt. or suite no.) See instructions. 1001 Fannin Street | | | | | address (optional) | | | | | |
| | 6 City, state, and ZIP code | | | | | | | | | | |
| | Houston, TX 77002 | | | | | | | | | | |
| | 7 List account number(s) here (optional) | | | | | | | | | | |
| | | | | | | | | | | | |
| Part | Taxpayer Identification Number (TIN) | | | | | | | | | | |
| | our TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. | Soc | cial se | curity n | umber | | | | | | |
| disrega | viduals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or dred entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If not have a number, see <i>How to get a TIN</i> , later. | | | | - | | - | | | | |
| Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Number To Give the Requester for quidelines on whose number to enter. | | | | | | | | | | | |
| neque. | ner for guidelines on whose humber to enter. | Employer identification number | | | | | | | | | |
| | | 7 | 5 | | 1 2 | 2 | 2 3 | 5 2 | 8 | | |
| Part | II Certification | | | | - | | | 11_ | - | | |
| | penalties of perjury, I certify that: | | | | | | | | | | |
| 2. I an | number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by thackup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer | ne In | ternal | | | | | | n subj | ect | |
| 3. I an | a U.S. citizen or other U.S. person (defined below); and | | | | | | | | | | |
| 4. The | FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. | | | | | | | | | | |
| interes debt, co | ation instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisit ntributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not rect TIN. See the instructions for Part II, later. | on or | aban | donme | ntofse | cure | d prop | erty, car | cellat | ion of | |
| Sign Here | Signature of Richal Salary | | 12 | 2/6/ | 20 ⁻ | 19 | | | | | |