

P-CARD PURCHASE REQUISITION FORM

I. REQUISITION

TODAY'S DATE	DATE NEEDED	MANAGER NAME	FY	DEPT.	DIVISION	DIVISION #
12/7/2020		Gary Bonkowski	21	D210	Logist & Warehouse	2180

II. PROCUREMENT

VENDOR NAME	ITEM OR SERVICE REQUESTED
Enterprise	Vehicle Rentals for Elections (28 Invoices)

	FUND	AGENCY	UNIT	ACTIVITY	APPROP	OBJECT CODE	TOTAL (\$)
LINE1	100	D210	2180	ELEC	ELEI	8201	\$ 28,734.98
LINE2							
LINE3							
							\$ 28,734.98

P-CARD (NC)	
NV	
LQ	
BidSync #	
SS	
CL	

PROCURER SIGNATURE	DATE	RECONCILED SIGNATURE	DATE
<i>Joseph Rodenback</i>	12/7/2020		

III. BUDGET

BUDGET SIGNATURE	DATE



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1LJYJ2
8000-4131-8192
11/12/2020
L509485

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/21/2020 08:10 AM

Date/Time In
11/12/2020 09:14 AM

Renter
MARICOPACOUNTYELECTIONS, GARY

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	8U02G6	GCAR	7TQ2CR	21,841	23,069

VIN: 2C4RDGCG3LR161059

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 HR	15.84	15.84
TIME & DISTANCE	3 WK	240.00	720.00
TIME & DISTANCE	1 DAY	48.00	48.00
Subtotal			783.84
STADIUM SURCHARGE	PCT	3.25	25.47
VEHICLE LICENSE SURCHARGE	PCT	5.00	39.19
TRANS PRIVILEGE TAX	PCT	10.60	83.09

Amount Due (USD)

931.59

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

931.59

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1LJYJ2

Amount
931.59

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1MJP5W
8000-4131-8273
11/12/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	240.00	480.00
TIME & DISTANCE	3 DAY	48.00	144.00
Subtotal			624.00
STADIUM SURCHARGE	PCT	3.25	20.28
VEHICLE LICENSE SURCHARGE	PCT	5.00	31.20
TRANS PRIVILEGE TAX	PCT	10.60	66.14

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003-2438

RENTAL INFORMATION

Date/Time Out
10/26/2020 09:56 AM

Date/Time In
11/12/2020 09:17 AM

Renter
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

Amount Due (USD) **741.62**

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	FP94713	GCAR	7SM3JV	32,896	33,908

VIN: 2C4RDGCGXKR742489

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
Date of Loss	Type of Loss
	Type of Vehicle
	Repair Shop

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 741.62

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1MJP5W

Amount
741.62

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1MJS2H
8000-4131-8623
11/12/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	240.00	480.00
TIME & DISTANCE	3 DAY	48.00	144.00
Subtotal			624.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	31.20
STADIUM SURCHARGE	PCT	3.25	20.28
TRANS PRIVILEGE TAX	PCT	10.60	66.14

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003-2438

RENTAL INFORMATION

Date/Time Out
10/26/2020 10:02 AM

Date/Time In
11/12/2020 09:26 AM

Renter
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

Amount Due (USD)

741.62

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
BLACK	CLY5102	GCAR	7SPX71	39,803	40,763

VIN: 2C4RDGEG5KR743899

CLAIM INFORMATION

Claim# / PO# / RO# Insured

Date of Loss Type of Loss Type of Vehicle

Repair Shop

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1MJS2H

Amount
741.62

GPBR
5010

Amount Due (USD)

741.62

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1MP6MZ
8000-4136-5748
11/16/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	3 DAY	48.00	144.00
TIME & DISTANCE	2 WK	240.00	480.00
Subtotal			624.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	31.20
STADIUM SURCHARGE	PCT	3.25	20.28
TRANS PRIVILEGE TAX	PCT	10.60	66.14

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/26/2020 03:00 PM

Date/Time In
11/12/2020 11:16 AM

Renter
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

Amount Due (USD)

741.62

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	8MNW362	GCAR	7TTLLM	21,304	22,233

VIN: 2C4RDGCG2KR797423

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
Date of Loss	Type of Loss
	Type of Vehicle
	Repair Shop

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1MP6MZ

Amount
741.62

GPBR
5010

Amount Due (USD)

741.62

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1NZ659
8000-4131-8847
11/12/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	240.00	480.00
Subtotal			480.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	24.00
STADIUM SURCHARGE	PCT	3.25	15.60
TRANS PRIVILEGE TAX	PCT	10.60	50.88

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/30/2020 04:41 PM

Date/Time In
11/12/2020 09:34 AM

Renter
MARICOPA COUNTY ARKIN, TYLER

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
BLACK	8JQR231	GCAR	7SRHGD	34,303	34,306

VIN: 2C4RDGEG2KR674671

BLACK	BAB6007	GR CARAV	7SXN41	23,336	23,927
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VIN: 2C4RDGCG9KR743116

CLAIM INFORMATION

Claim# / PO# / RO# Insured

Date of Loss Type of Loss Type of Vehicle

Repair Shop

Amount Due (USD)

570.48

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 570.48

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1NZ659

Amount
570.48

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1NZ68G
8000-4131-8695
11/12/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	240.00	480.00
Subtotal			480.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	24.00
STADIUM SURCHARGE	PCT	3.25	15.60
TRANS PRIVILEGE TAX	PCT	10.60	50.88

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/30/2020 04:42 PM

Date/Time In
11/12/2020 09:32 AM

Renter
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
MAROON	UMK8799	GCAR	7TB4C9	31,980	32,231

VIN: 2C4RDGCG4KR807921

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
Date of Loss	Type of Loss
	Type of Vehicle
	Repair Shop

Amount Due (USD)

570.48

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 570.48

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1NZ68G

Amount
570.48

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1NZB3G
8000-4143-2665
11/20/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	3 WK	240.00	720.00
Subtotal			720.00
STADIUM SURCHARGE	PCT	3.25	23.40
VEHICLE LICENSE SURCHARGE	PCT	5.00	36.00
TRANS PRIVILEGE TAX	PCT	10.60	76.32

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/30/2020 05:11 PM

Date/Time In
11/20/2020 09:10 AM

Renter
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
MAROON	R003686	GCAR	7TLWXG	12,299	13,327

VIN: 2C4RDGCG9LR179811

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
Date of Loss	Type of Loss
	Type of Vehicle
	Repair Shop

Amount Due (USD)

855.72

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 855.72

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1NZB3G

Amount
855.72

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

19SN2T
8000-4101-3694
10/22/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			850.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	42.50
STADIUM SURCHARGE	PCT	3.25	27.63
TRANS PRIVILEGE TAX	PCT	10.60	90.10

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
09/21/2020 11:54 AM

Date/Time In
10/21/2020 08:10 AM

Renter
MARICOPACOUNTYELECTIONS, GARY

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	8U02G6	GCAR	7TQ2CR	19,914	21,841

VIN: 2C4RDGCG3LR161059

CLAIM INFORMATION

Claim# / PO# / RO# Insured

Date of Loss Type of Loss Type of Vehicle

Repair Shop

Amount Due (USD)

1,010.23

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

1010.23

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
19SN2T

Amount
1010.23

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

19SPV2
8000-4101-3755
10/22/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			850.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	42.50
STADIUM SURCHARGE	PCT	3.25	27.63
TRANS PRIVILEGE TAX	PCT	10.60	90.10

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
09/21/2020 11:56 AM

Date/Time In
10/21/2020 08:12 AM

Renter
SANCHEZ, MARK

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CTY4332	GCAR	7T1TH7	13,300 14,004

VIN: 2C4RDGCG0LR174853

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

Amount Due (USD)

1,010.23

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

1010.23

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
19SPV2

Amount
1010.23

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

19SQB6
8000-4101-3627
10/22/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			850.00
STADIUM SURCHARGE	PCT	3.25	27.63
VEHICLE LICENSE SURCHARGE	PCT	5.00	42.50
TRANS PRIVILEGE TAX	PCT	10.60	90.10

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
09/21/2020 11:48 AM

Date/Time In
10/21/2020 08:07 AM

Renter
HARO, EDGARDO

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	8NHG283	GCAR	7T8Y1P	14,685	20,681

VIN: 2C4RDGCG4KR808115

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

Amount Due (USD)

1,010.23

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

1010.23

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
19SQB6

Amount
1010.23

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1FS7X8
8000-4127-9585
11/10/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 WK	240.00	240.00
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			1,090.00
STADIUM SURCHARGE	PCT	3.25	35.43
VEHICLE LICENSE SURCHARGE	PCT	5.00	54.50
TRANS PRIVILEGE TAX	PCT	10.60	115.54

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003-2438

RENTAL INFORMATION

Date/Time Out
10/05/2020 11:43 AM

Date/Time In
11/10/2020 09:18 AM

Renter
MARICOPA COUNTY ELECTIONS, ROBERTO

Amount Due (USD) **1,295.47**

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
GRAY MED	8MZY776	GCAR	7TXK7N	30,357 33,110

VIN: 2C4RDGCG7KR771187

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
Date of Loss	Type of Loss
	Type of Vehicle
	Repair Shop

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 1295.47

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1FS7X8

Amount
1295.47

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1FSCQ6
8000-4127-9581
11/10/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
TIME & DISTANCE	1 WK	240.00	240.00
Subtotal			1,090.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	54.50
STADIUM SURCHARGE	PCT	3.25	35.43
TRANS PRIVILEGE TAX	PCT	10.60	115.54

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/05/2020 11:45 AM

Date/Time In
11/10/2020 09:19 AM

Renter
MARICOPA COUNTY ELECTIONS, ROBERTO

Amount Due (USD) **1,295.47**

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
GRAY MED	MRS3953	GCAR	7TNL8W	28,494 31,118

VIN: 2C4RDGCG8KR807212

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
Date of Loss	Type of Loss
	Type of Vehicle
	Repair Shop

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 1295.47

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1FSCQ6

Amount
1295.47

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1FSFC1
8000-4143-2005
11/20/2020
L509485

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/05/2020 11:48 AM

Date/Time In
11/20/2020 09:07 AM

Renter
MARICOPA COUNTY ELECTIONS, ROBERTO

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY LT	BTC2944	VOYA	7TKT1N	20,180	21,384

VIN: 2C4RC1DG8LR172119

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
TIME & DISTANCE	2 WK	240.00	480.00
TIME & DISTANCE	2 DAY	48.00	96.00
Subtotal			1,426.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	71.30
STADIUM SURCHARGE	PCT	3.25	46.34
TRANS PRIVILEGE TAX	PCT	10.60	151.16

Amount Due (USD)

1,694.80

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

1694.80

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1FSFC1

Amount
1694.80

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1FSH42
8000-4128-0322
11/10/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
TIME & DISTANCE	1 WK	240.00	240.00
Subtotal			1,090.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	54.50
STADIUM SURCHARGE	PCT	3.25	35.43
TRANS PRIVILEGE TAX	PCT	10.60	115.54

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/05/2020 11:51 AM

Date/Time In
11/10/2020 09:47 AM

Renter
MARICOPA COUNTY ELECTIONS, ROBERTO

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
BLACK	ALJ6072	GCAR	7T255X	21,730 23,595

VIN: 2C4RDGCG2KR775373

CLAIM INFORMATION

Claim# / PO# / RO# Insured

Date of Loss Type of Loss Type of Vehicle

Repair Shop

Amount Due (USD)

1,295.47

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 1295.47

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1FSH42

Amount
1295.47

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1FSHQ1
8000-4128-0369
11/10/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
TIME & DISTANCE	1 WK	240.00	240.00
Subtotal			1,090.00
STADIUM SURCHARGE	PCT	3.25	35.43
VEHICLE LICENSE SURCHARGE	PCT	5.00	54.50
TRANS PRIVILEGE TAX	PCT	10.60	115.54

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/05/2020 11:53 AM

Date/Time In
11/10/2020 09:49 AM

Renter
MARICOPA COUNTY ELECTIONS, ROBERTO

Amount Due (USD) **1,295.47**

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	GIFG58	GCAR	7SDQPX	33,651	34,789

VIN: 2C4RDGEG1KR695849

SILVER	BTJ3578	GCAR	7ST5PJ	37,802	39,680
--------	---------	------	--------	--------	--------

VIN: 2C4RDGCG2KR725489

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
Date of Loss	Type of Loss
	Type of Vehicle
	Repair Shop

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 1295.47

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1FSHQ1

Amount
1295.47

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1FSKDM
8000-4137-0902
11/16/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 DAY	48.00	48.00
TIME & DISTANCE	2 DAY	48.00	96.00
TIME & DISTANCE	1 WK	240.00	240.00
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			1,234.00
STADIUM SURCHARGE	PCT	3.25	40.11
VEHICLE LICENSE SURCHARGE	PCT	5.00	61.70
TRANS PRIVILEGE TAX	PCT	10.60	130.80

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003-2438

RENTAL INFORMATION

Date/Time Out
10/05/2020 11:55 AM

Date/Time In
11/13/2020 04:00 PM

Renter
MARICOPA COUNTY ELECTIONS, ROBERTO

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
BLACK	8NVC125	VOYA	7TPR8Y	18,735 23,299

VIN: 2C4RC1DG7LR172709

CLAIM INFORMATION

Claim# / PO# / RO# Insured

Date of Loss Type of Loss Type of Vehicle

Repair Shop

Amount Due (USD)

1,466.61

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1FSKDM

Amount
1466.61

GPBR
5010

Amount Due (USD)

1466.61

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1FSKR6
8000-4127-9685
11/10/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 WK	240.00	240.00
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			1,090.00
STADIUM SURCHARGE	PCT	3.25	35.43
VEHICLE LICENSE SURCHARGE	PCT	5.00	54.50
TRANS PRIVILEGE TAX	PCT	10.60	115.54

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/05/2020 11:57 AM

Date/Time In
11/10/2020 09:20 AM

Renter
MARICOPA COUNTY ELECTIONS, ROBERTO

Amount Due (USD) **1,295.47**

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	FP106949	GCAR	7SL2C9	33,920	34,586
VIN: 2C4RDGCG2KR735357					
GRAY MED	3EA6883	GCAR	7SS7D1	34,905	37,326
VIN: 2C4RDGCG1KR776918					

CLAIM INFORMATION

Claim# / PO# / RO# Insured

Date of Loss Type of Loss Type of Vehicle

Repair Shop

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 1295.47

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1FSKR6

Amount
1295.47

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1FSMFL
8000-4128-0625
11/10/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
TIME & DISTANCE	1 WK	240.00	240.00
Subtotal			1,090.00
STADIUM SURCHARGE	PCT	3.25	35.43
VEHICLE LICENSE SURCHARGE	PCT	5.00	54.50
TRANS PRIVILEGE TAX	PCT	10.60	115.54

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/05/2020 11:59 AM

Date/Time In
11/10/2020 09:57 AM

Renter
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

Amount Due (USD) **1,295.47**

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	2T76B2	GCAR	7TJ1SM	19,670 22,584

VIN: 2C4RDGCG5LR161094

CLAIM INFORMATION

Claim# / PO# / RO# Insured

Date of Loss Type of Loss Type of Vehicle

Repair Shop

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 1295.47

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1FSMFL

Amount
1295.47

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1JC4CQ
8000-4131-7956
11/12/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			850.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	42.50
STADIUM SURCHARGE	PCT	3.25	27.62
TRANS PRIVILEGE TAX	PCT	10.60	90.10

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/14/2020 10:43 AM

Date/Time In
11/12/2020 09:04 AM

Renter
PERSONKE, CARON

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
GRAY LT	MTL4582	GCAR	7TBYFL	21,754 24,251

VIN: 2C4RDGCG2KR804600

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

Amount Due (USD)

1,010.22

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

1010.22

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1JC4CQ

Amount
1010.22

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1JC599
8000-4131-8155
11/12/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			850.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	42.50
STADIUM SURCHARGE	PCT	3.25	27.62
TRANS PRIVILEGE TAX	PCT	10.60	90.10

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/14/2020 10:47 AM

Date/Time In
11/12/2020 09:13 AM

Renter
BARTES, VIRGINIA

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
\$BLUE	6EA9326	GCAR	7TXR4L	35,650 37,300

VIN: 2C4RDGEG0KR787390

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
Date of Loss	Type of Loss
	Type of Vehicle
	Repair Shop

Amount Due (USD)

1,010.22

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

1010.22

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1JC599

Amount
1010.22

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1JC6XK
8000-4132-0013
11/12/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			850.00
STADIUM SURCHARGE	PCT	3.25	27.62
VEHICLE LICENSE SURCHARGE	PCT	5.00	42.50
TRANS PRIVILEGE TAX	PCT	10.60	90.10

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/14/2020 10:50 AM

Date/Time In
11/12/2020 10:39 AM

Renter
MEEKER, JAMES

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	IVE095	GCAR	7S8RK9	31,353 36,512

VIN: 2C4RDGEG1KR694944

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

Amount Due (USD)

1,010.22

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

1010.22

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1JC6XK

Amount
1010.22

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1JC8GB
8000-4143-2036
11/20/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 WK	240.00	240.00
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			1,090.00
STADIUM SURCHARGE	PCT	3.25	35.43
VEHICLE LICENSE SURCHARGE	PCT	5.00	54.50
TRANS PRIVILEGE TAX	PCT	10.60	115.54

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/14/2020 10:53 AM

Date/Time In
11/20/2020 09:06 AM

Renter
NICCUM, THOMAS

Amount Due (USD) **1,295.47**

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	8KNE592	GCAR	7SMQKG	36,597	38,374

VIN: 2C4RDGCG1KR748245

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

1295.47

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1JC8GB

Amount
1295.47

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1JCB7L
8000-4131-9004
11/12/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			850.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	42.50
STADIUM SURCHARGE	PCT	3.25	27.62
TRANS PRIVILEGE TAX	PCT	10.60	90.10

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/14/2020 10:56 AM

Date/Time In
11/12/2020 09:45 AM

Renter
VREELAND, SCOTT

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	FL404ABT	GCAR	8C8MNX	17,830	19,965

VIN: 2C4RDGCG2LR252999

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

Amount Due (USD)

1,010.22

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

1010.22

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1JCB7L

Amount
1010.22

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1KQNCS
8000-4132-0666
11/12/2020
L509485

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	850.00	850.00
Subtotal			850.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	42.50
STADIUM SURCHARGE	PCT	3.25	27.62
TRANS PRIVILEGE TAX	PCT	10.60	90.10

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003--2438

RENTAL INFORMATION

Date/Time Out
10/19/2020 01:15 PM

Date/Time In
11/12/2020 11:14 AM

Renter
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	FP106949	GCAR	7SL2C9	34,586	37,132

VIN: 2C4RDGCG2KR735357

CLAIM INFORMATION

Claim# / PO# / RO# Insured

Date of Loss Type of Loss Type of Vehicle

Repair Shop

Amount Due (USD)

1,010.22

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
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Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 1010.22

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1KQNCS

Amount
1010.22

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1LJS0Z
8000-4131-8561
11/12/2020
L509485

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003-2438

RENTAL INFORMATION

Date/Time Out
10/21/2020 08:12 AM

Date/Time In
11/12/2020 09:26 AM

Renter
SANCHEZ, MARK

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	CTY4332	GCAR	7T1TH7	14,004	15,617

VIN: 2C4RDGCG0LR174853

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 HR	15.84	15.84
TIME & DISTANCE	1 DAY	48.00	48.00
TIME & DISTANCE	3 WK	240.00	720.00
Subtotal			783.84
STADIUM SURCHARGE	PCT	3.25	25.47
VEHICLE LICENSE SURCHARGE	PCT	5.00	39.19
TRANS PRIVILEGE TAX	PCT	10.60	83.09

Amount Due (USD)

931.59

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

931.59

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1LJS0Z

Amount
931.59

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1LJVCX
8000-4131-8625
11/12/2020
L509485

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003-2438

RENTAL INFORMATION

Date/Time Out
10/21/2020 08:07 AM

Date/Time In
11/12/2020 09:19 AM

Renter
HARO, EDGARDO

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	8NHG283	GCAR	7T8Y1P	16,681	18,553

VIN: 2C4RDGCG4KR808115

CLAIM INFORMATION

Claim# / PO# / RO#

Insured

Date of Loss

Type of Loss

Type of Vehicle

Repair Shop

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	3 WK	240.00	720.00
TIME & DISTANCE	1 DAY	48.00	48.00
TIME & DISTANCE	1 HR	15.84	15.84
Subtotal			783.84
VEHICLE LICENSE SURCHARGE	PCT	5.00	39.19
STADIUM SURCHARGE	PCT	3.25	25.47
TRANS PRIVILEGE TAX	PCT	10.60	83.09

Amount Due (USD)

931.59

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177

GP50EFTAR@erac.com

Payment Due within 30 days of invoice date

Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD)

931.59

Remit To :

ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:

Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1LJVCX

Amount
931.59

GPBR
5010



1225 S 7TH ST
PHOENIX, AZ 85034-4501

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:

1MJPWG
8000-4154-1900
11/30/2020
L509485

BILL TO

Maricopa Integrated Health System
ATTN: Sophia Deal
2611 EAST PIERCE ST
PHOENIX, AZ - 85003-2438

RENTAL INFORMATION

Date/Time Out
10/26/2020 09:58 AM

Date/Time In
11/30/2020 08:52 AM

Renter
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
GRAY MED	BEC7812	CHEROKEE	7T16B7	20,263	20,830

VIN: 1C4PJLDB5LD535265

GRAY LT	BTC2944	VOYA	7TKT1N	21,384	21,900
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VIN: 2C4RC1DG8LR172119

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
Date of Loss	Type of Loss
	Type of Vehicle
	Repair Shop

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	800.00	800.00
TIME & DISTANCE	3 DAY	48.00	144.00
TIME & DISTANCE	1 WK	240.00	240.00

Subtotal 1,184.00

VEHICLE LICENSE SURCHARGE	PCT	5.00	59.20
STADIUM SURCHARGE	PCT	3.25	38.48
TRANS PRIVILEGE TAX	PCT	10.60	125.50

Amount Due (USD)

1,407.18

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#: 6022574177
GP50EFTAR@erac.com
Payment Due within 30 days of invoice date
Late payments are subject to a finance charge.



Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Amount Due (USD) 1407.18

Remit To :
ENTERPRISE LEASING COMPANY OF PHOENIX, LLC
PO BOX 847178
DALLAS, TX 75284-

Paid By:
Maricopa Integrated Health System
2611 EAST PIERCE ST
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #
L509485

Rental Agreement
1MJPWG

Amount
1407.18

GPBR
5010