

## P-CARD PURCHASE REQUISITION FORM

### I. REQUISITION

TODAY'S DATE	DATE NEEDED	MANAGER NAME	FY	DEPT.	DIVISION	DIVISION #
1/7/2021		Gary Bonkowski	21	D210	Logist & Warehouse	2180

### II. PROCUREMENT

VENDOR NAME	ITEM OR SERVICE REQUESTED
Enterprise	Vehicle Rentals for Elections (3 Invoices)

	FUND	AGENCY	UNIT	ACTIVITY	APPROP	OBJECT CODE	TOTAL (\$)
LINE1	100	D210	2180	ELEC	ELEI	8201	\$ 944.90
LINE2	100	D210	2180	ELEC	ELEI	8201	\$ 2,271.99
LINE3	100	D210	2180	ELEC	ELEI	8201	\$ 1,709.24
							\$ 4,926.13

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

PROCURER SIGNATURE	DATE	RECONCILED SIGNATURE	DATE
<i>Joseph Rodenback</i>	1/7/2021		

### III. BUDGET

BUDGET SIGNATURE	DATE



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**1NG22F**  
**6500-4100-6158**  
**11/11/2020**  
**50Z2392**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	449.95	899.90
Subtotal			899.90
VEHICLE LICENSE SURCHARGE	PCT	5.00	45.00

#### Amount Due (USD)

**944.90**

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.

#### BILL TO

Maricopa County Elections  
ATTN: David Lafond  
320 W LINCOLN ST  
PHOENIX, AZ - 85003--2438

#### RENTAL INFORMATION

**Date/Time Out** 10/29/2020 07:00 AM  
**Date/Time In** 11/11/2020 10:08 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL54198	MVCA	7T7SJ0	10,152 11,178

**VIN:** 3HAEUMML9ML201406

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**

**Repair Shop**

#### For Billing Inquiries / Payment Terms :

Tel#: +1 6023743830  
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 #**  
50Z2392

**Rental Agreement**  
1NG22F

**Amount**  
944.90

**GPBR**  
508T

**Amount Due (USD)**

944.90

**Paid By:**  
Maricopa County Elections  
320 W LINCOLN ST  
PHOENIX, AZ 85003-2438



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

1NG7ZS  
6500-4119-0788  
11/25/2020  
50Z2392

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	449.95	1,799.80
EXCESS DISTANCE CHARGE	1432 DIS	0.25	358.00
DEF	1 RNT	6.00	6.00
Subtotal			2,163.80
VEHICLE LICENSE SURCHARGE	PCT	5.00	108.19

#### BILL TO

Maricopa County Elections  
ATTN: David Lafond  
320 W LINCOLN ST  
PHOENIX, AZ - 85003--2438

#### RENTAL INFORMATION

Date/Time Out  
10/29/2020 07:00 AM

Date/Time In  
11/25/2020 10:03 AM

Renter  
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL97415	43CA	7RNGQF	67,870 69,302

VIN: 3HAMMMML9KL098433

#### CLAIM INFORMATION

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

#### Amount Due (USD)

2,271.99

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#: +1 6023743830  
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) 2271.99

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

Paid By:  
Maricopa County Elections  
320 W LINCOLN ST  
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #  
50Z2392

Rental Agreement  
1NG7ZS

Amount  
2271.99

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

1NGC4N  
6500-4110-0465  
11/18/2020  
50Z2392

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	3 WK	449.95	1,349.85
EXCESS DISTANCE CHARGE	1088 DIS	0.25	272.00
DEF	1 RNT	6.00	6.00
Subtotal			1,627.85
VEHICLE LICENSE SURCHARGE	PCT	5.00	81.39

#### BILL TO

Maricopa County Elections  
ATTN: David Lafond  
320 W LINCOLN ST  
PHOENIX, AZ - 85003--2438

#### RENTAL INFORMATION

Date/Time Out  
10/29/2020 07:00 AM

Date/Time In  
11/18/2020 10:08 AM

Renter  
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CK55523	268A	7S1JVQ	40,293 41,381

VIN: 5PVNJ8JVXL4S76503

#### CLAIM INFORMATION

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

#### Amount Due (USD)

1,709.24

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#: +1 6023743830  
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) 1709.24

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

Paid By:  
Maricopa County Elections  
320 W LINCOLN ST  
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #  
50Z2392

Rental Agreement  
1NGC4N

Amount  
1709.24

GPBR  
508T



## Joseph Rodenback - RISCX

**From:** Mayberry, Jared <Jared.Mayberry@ehi.com>  
**Sent:** Thursday, January 7, 2021 4:33 PM  
**To:** Joseph Rodenback - RISCX  
**Subject:** Enterprise Payment

Joey,

Here is your screen shot receipt.

Thanks again,

Rental Financial Systems - 801XF TRUCK RENTAL CEN PHOENIX 508T - Internet Explorer

**Accounts Receivable ^A**   **Invoices ^I**   **Cash Box ^B**

**Payments MARICOPA COUNTY ELECTIONS DEPT. ( 50Z2392 )**

**Credit Card**

Credit Card Number: \*\*\*\*\*7203   Expiration Date: 0123   Card Holders Name: joseph rodenback   Card Brand: VISA

Card Type: CREDIT CARD   Transaction Type: PAYMENT   Amount: 4,926.13   Auth Number:   Cards on File: --SELECT--

**Applied Payments**

Invoice#	Ticket #	Bill
650041190788	1NG7ZS	Ma
650041100465	1NGC4N	Ma
650041006158	1NG22F	Ma

**Info Messages -- Webpage Dialog**

Select OK to continue.

- Payments
  - Credit Card Sale complete. Total of \$4,926.13 was charged.

**OK**

Invoice Amount	Pay
\$2,271.99	2,2
\$1,709.24	1,7
\$944.90	9

**Totals**   \$4,926.13   \$4

**Apply Payments**   **Swipe Again**   **Cancel**

Add N



**Jared Mayberry**

Assistant Manager  
Commercial Truck Rental  
Phoenix AZ

602-374-3830 office  
913-660-4200 cell  
602-374-3827 fax  
[Jared.Mayberry@ehi.com](mailto:Jared.Mayberry@ehi.com)

330 N 24th St.  
Phoenix, AZ 85008  
[enterprisetrucks.com](http://enterprisetrucks.com)

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## 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

**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**  
1LJYJ2

**Amount**  
931.59

**GPBR**  
5010

#### Amount Due (USD)

931.59

#### 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 #:

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

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  
1MP6MZ

Amount  
741.62

GPBR  
5010



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

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  
1NZB3G

Amount  
855.72

GPBR  
5010

#### Amount Due (USD)

855.72

#### 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 #:

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  
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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

#### 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

#### 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

#### 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

#### 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

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  
1FSCQ6

Amount  
1295.47

GPBR  
5010

Amount Due (USD)

1295.47

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 #:**

**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

**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**  
1FSFC1

**Amount**  
1694.80

**GPBR**  
5010

**Amount Due (USD)**

1694.80

**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 #:**

**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

**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
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**

#### 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

Amount Due (USD)

1466.61

#### 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  
1FSKDM

Amount  
1466.61

GPBR  
5010



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

#### 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

#### 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  
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 #:

1KQNCNCS  
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  
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  
1KQNCNCS

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
---------	---------	------	--------	--------	--------

**VIN:** 2C4RC1DG8LR172119

#### CLAIM INFORMATION

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

#### 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

## P-CARD PURCHASE REQUISITION FORM

### I. REQUISITION

TODAY'S DATE	DATE NEEDED	MANAGER NAME	FY	DEPT.	DIVISION	DIVISION #
12/1/2020		Gary Bonkowski	21	D210	Logist & Warehouse	2180

### II. PROCUREMENT

VENDOR NAME	ITEM OR SERVICE REQUESTED
Enterprise	Vehicle Rentals for Elections (5 Invoices)

	FUND	AGENCY	UNIT	ACTIVITY	APPROP	OBJECT CODE	TOTAL (\$)
LINE1	100	D210	2180	ELEC	ELEI	8201	\$ 1,980.55
LINE2	100	D210	2180	ELEC	ELEI	8201	\$ 2,015.46
LINE3	100	D210	2180	ELEC	ELEI	8201	\$ 1,947.74
LINE4	100	D210	2180	ELEC	ELEI	8201	\$ 1,933.30
LINE5	100	D210	2180	ELEC	ELEI	8201	\$ 942.28
							<b>\$ 8,819.33</b>

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

PROCURER SIGNATURE	DATE	RECONCILED SIGNATURE	DATE
<i>Joseph Rodenback</i>	12/1/2020		

III. BUDGET	
BUDGET SIGNATURE	DATE

## Joseph Rodenback - RISCX

---

**From:** Mayberry, Jared <Jared.Mayberry@ehi.com>  
**Sent:** Friday, December 11, 2020 12:50 PM  
**To:** Joseph Rodenback - RISCX  
**Subject:** RE: Enterprise Truck Invoices

Thanks again!



Rental Financial Systems - 801XF TRUCK RENTAL CEN PHOENIX 508T - Internet Explorer

Accounts Receivable ^A Invoices ^I Cash Box ^B

**Payments MARICOPA COUNTY ELECTIONS DEPT. ( 50Z2392 )**

**Credit Card**

Credit Card Number: \*\*\*\*\*7203 Expiration Date: 0123 Card Holders Name: joseph rodenback Card Brand: VISA

Card Type: CREDIT CARD Transaction Type: PAYMENT Amount: 8,819.33 Auth Number: Cards on File: --SELECT--

**Applied Payments**

Invoice#	Ticket #	Bill	Amount	Payment
650040836050	1D40RK	Ma	\$1,980.55	1,980.55 X
650040836016	1D4DJQ	Ma	\$2,015.46	2,015.46 X
650040835841	1D4CG3	Ma	\$1,947.74	1,947.74 X
650040835963	1D40TW	Ma	\$1,933.30	1,933.30 X
650040974819	1NGD8K	Maricopa County Elections (X) v	\$942.28	942.28 X
<b>Totals</b>			\$8,819.33	\$8,819.33

Buttons: Apply Payments, Swipe Again, Cancel

**Info Messages -- Webpage Dialog**

Select OK to continue.

- Payments
  - Credit Card Sale complete. Total of \$8,819.33 was charged.

OK

**From:** Joseph Rodenback - RISCX <jrodenback@risc.maricopa.gov>  
**Sent:** Friday, December 11, 2020 10:42 AM  
**To:** Mayberry, Jared <Jared.Mayberry@ehi.com>  
**Subject:** RE: Enterprise Truck Invoices



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

1D4CG3  
6500-4083-5841  
10/29/2020  
50Z2392

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	1,799.99	1,799.99
EXCESS DISTANCE CHARGE	196 DIS	0.25	49.00
DEF	1 RNT	6.00	6.00
Subtotal			1,854.99
VEHICLE LICENSE SURCHARGE	PCT	5.00	92.75

#### BILL TO

Maricopa County Elections  
ATTN: David Lafond  
320 W LINCOLN ST  
PHOENIX, AZ - 85003-2438

#### RENTAL INFORMATION

Date/Time Out  
09/29/2020 12:18 PM

Date/Time In  
10/29/2020 06:59 AM

Renter  
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL97415	43CA	7RNGQF	67,674 67,870

VIN: 3HAMMMML9KL098433

#### CLAIM INFORMATION

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

#### Amount Due (USD)

1,947.74

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#: +1 6023743830  
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)

1947.74

#### Remit To :

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

#### Paid By:

Maricopa County Elections  
320 W LINCOLN ST  
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #  
50Z2392

Rental Agreement  
1D4CG3

Amount  
1947.74

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

1D4DJQ  
6500-4083-6016  
10/29/2020  
50Z2392

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	1,799.99	1,799.99
EXCESS DISTANCE CHARGE	454 DIS	0.25	113.50
DEF	1 RNT	6.00	6.00
Subtotal			1,919.49
VEHICLE LICENSE SURCHARGE	PCT	5.00	95.97

#### BILL TO

Maricopa County Elections  
ATTN: David Lafond  
320 W LINCOLN ST  
PHOENIX, AZ - 85003--2438

#### RENTAL INFORMATION

Date/Time Out  
09/29/2020 02:55 PM

Date/Time In  
10/29/2020 06:59 AM

Renter  
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL54198	MVCA	7T7SJ0	9,698 10,152

VIN: 3HAEUMML9ML201406

#### CLAIM INFORMATION

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

#### Amount Due (USD)

2,015.46

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#: +1 6023743830  
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)

2015.46

#### Remit To :

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

#### Paid By:

Maricopa County Elections  
320 W LINCOLN ST  
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #  
50Z2392

Rental Agreement  
1D4DJQ

Amount  
2015.46

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

1D40RK  
6500-4083-6050  
10/29/2020  
50Z2392

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 MTH	1,799.99	1,799.99
EXCESS DISTANCE CHARGE	321 DIS	0.25	80.25
DEF	1 RNT	6.00	6.00
Subtotal			1,886.24
VEHICLE LICENSE SURCHARGE	PCT	5.00	94.31

#### BILL TO

Maricopa County Elections  
ATTN: David Lafond  
320 W LINCOLN ST  
PHOENIX, AZ - 85003--2438

#### RENTAL INFORMATION

Date/Time Out  
09/29/2020 02:55 PM

Date/Time In  
10/29/2020 06:59 AM

Renter  
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CK55523	268A	7S1JVQ	40,372 40,693

VIN: 5PVDJ8JVXL4S76503

#### CLAIM INFORMATION

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

#### Amount Due (USD)

1,980.55

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#: +1 6023743830  
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) 1980.55

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

Paid By:  
Maricopa County Elections  
320 W LINCOLN ST  
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #  
50Z2392

Rental Agreement  
1D40RK

Amount  
1980.55

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**1D40TW**  
**6500-4083-5963**  
**10/29/2020**  
**50Z2392**

#### BILL TO

Maricopa County Elections  
ATTN: David Lafond  
320 W LINCOLN ST  
PHOENIX, AZ - 85003--2438

#### RENTAL INFORMATION

**Date/Time Out**  
09/29/2020 12:24 PM

**Date/Time In**  
10/29/2020 06:59 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
\$WHITE	CG40275	M2CA	7PBXTF	158,332 158,460
VIN: 1FVACWFC5JHJL8205				
WHITE	CL00414	43CA	7QH2W3	118,288 118,325
VIN: 1HTMMMML2KH570073				

#### 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	1,799.99	1,799.99
EXCESS DISTANCE CHARGE	165 DIS	0.25	41.25
Subtotal			1,841.24
VEHICLE LICENSE SURCHARGE	PCT	5.00	92.06

#### Amount Due (USD)

**1,933.30**

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#: +1 6023743830  
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 #**  
50Z2392

**Rental Agreement**  
1D40TW

**Amount**  
1933.30

**GPBR**  
508T

**Amount Due (USD)**

1933.30

**Paid By:**  
Maricopa County Elections  
320 W LINCOLN ST  
PHOENIX, AZ 85003-2438



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

1NGD8K  
6500-4097-4819  
11/09/2020  
50Z2392

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 DAY	89.99	359.96
TIME & DISTANCE	1 WK	449.95	449.95
EXCESS DISTANCE CHARGE	326 DIS	0.25	81.50
DEF	1 RNT	6.00	6.00
Subtotal			897.41
VEHICLE LICENSE SURCHARGE	PCT	5.00	44.87

#### BILL TO

Maricopa County Elections  
ATTN: David Lafond  
320 W LINCOLN ST  
PHOENIX, AZ - 85003-2438

#### RENTAL INFORMATION

Date/Time Out  
10/29/2020 07:00 AM

Date/Time In  
11/09/2020 07:00 AM

Renter  
MARICOPA COUNTY ELECTIONS, GARY BONKOWSKI

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL00414	43CA	7QH2W3	118,325 118,651

VIN: 1HTMMML2KH570073

#### CLAIM INFORMATION

Claim# / PO# / RO#      Insured

Date of Loss      Type of Loss      Type of Vehicle

Repair Shop

#### Amount Due (USD)

942.28

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#: +1 6023743830  
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) 942.28

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

Paid By:  
Maricopa County Elections  
320 W LINCOLN ST  
PHOENIX, AZ 85003-2438

Email Remit To: AskNationalPayments@ehi.com

Fed Tax Id: 86-0408806

Account #  
50Z2392

Rental Agreement  
1NGD8K

Amount  
942.28

GPBR  
508T

## P-CARD PURCHASE REQUISITION FORM

### I. REQUISITION

TODAY'S DATE	DATE NEEDED	MANAGER NAME	FY	DEPT.	DIVISION	DIVISION #
11/6/2020		Gary Bonkowski	21	D210	Logist & Warehouse	2180

### II. PROCUREMENT

VENDOR NAME	ITEM OR SERVICE REQUESTED
Enterprise	Rental Car Damage

	FUND	AGENCY	UNIT	ACTIVITY	APPROP	OBJECT CODE	TOTAL (\$)
LINE1	100	D210	2180	ELEC	ELE1	8201	\$ 2,517.40
LINE2							
LINE3							
							\$ 2,517.40

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

PROCURER SIGNATURE	DATE	RECONCILED SIGNATURE	DATE
<i>Joseph Rodenback</i>	11/6/2020		

### III. BUDGET

BUDGET SIGNATURE	DATE



## Payment Information

**JOHN BOLLINGER MARICOPA COUNTY  
ELECTIONS** | Billing Invoice #: 3004757517

[Print](#)[View Payment History](#)**Payment Confirmation**

Your payment has been authorized.

**Please print this page for your records.**

**Remit Information**

Claim Number: **16200322**

Unit Number: **7SJF56**

**Personal Information**

Credit Card Type: **Visa**

Name on Credit Card: **Joseph Rodenback**

Credit Card Address 1: **111 S. 3rd Ave.**

Credit Card Address 2:


City: **Phoenix**

State: **AZ**

Zip: **85003**

**Payment Information**

Created: **Fri Nov 6 2020 13:53:32**

Credit Card Number: \*\*\*\*\*7203 

Credit Card Expiration Date: **01/2023**

Payment Date: **11/06/2020**

Amount: **\$ 2,517.40**

Total Amount: **\$ 2,517.40**

Confirmation Number: **754792293**

Email Address: **jrodenback@risc.maricopa.gov**

[Exit](#)

©2020 Official Payments





PO BOX 843369  
KANSAS CITY MO 64184  
UNITED STATES

10/22/2020

JOHN BOLLINGER MARICOPA COUNTY ELECTIONS

Unit Number	: 7SJF56
Claim Number	: 16200322
Date of Loss	: 07/15/2020
Renter's name	: JOHN BOLLINGER MARICOPA
Vehicle (YMM)	COUNTY ELECTIONS
Billing Invoice	: 2019-T1LC-FORD
	: 3004757517

BALANCE DUE: \$2517.40

There remains a balance due in the amount shown above. Please remit payment in full within ten (10) days to the address above and include our claim number on your payment. If you prefer you may also pay using a debit card, credit card or directly from your bank account at the following website:

<http://www.claimtopay.com>

If you have any questions, please contact the undersigned.

If you have any feedback regarding the handling of this claim please send an email to [ClaimFeedback@ehi.com](mailto:ClaimFeedback@ehi.com).

Sincerely,  
CODY HULTGREN

Phone: 866-300-3238 3949  
Email: [e192vd@erac.com](mailto:e192vd@erac.com)



## Joseph Rodenback - RISCX

---

**From:** Mayberry, Jared <Jared.Mayberry@ehi.com>  
**Sent:** Friday, October 23, 2020 10:18 AM  
**To:** Joseph Rodenback - RISCX  
**Subject:** RE: Damage information related to claim # 16200322 with ENTERPRISE  
**Attachments:** 1.png; 2.png

Joey,

Looks like there was damage to the passenger side rear rocker panel. It appears an Erwin Boyd signed for the damage.

Let me know if you need anything else.

Jared

-----Original Message-----

From: Joseph Rodenback - RISCX <jrodenback@risc.maricopa.gov>  
Sent: Friday, October 23, 2020 9:56 AM  
To: Mayberry, Jared <Jared.Mayberry@ehi.com>  
Subject: FW: Damage information related to claim # 16200322 with ENTERPRISE

Hi Jared,

Are you able to provide any information on this invoice we received for damage to a vehicle?

Thanks,

Joey Rodenback  
Maricopa County Recorder/Elections  
jrodenback@risc.maricopa.gov

-----Original Message-----

From: Gary Bonkowski - RISCX <gbonkowski@risc.maricopa.gov>  
Sent: Friday, October 23, 2020 7:51 AM  
To: Joseph Rodenback - RISCX <jrodenback@risc.maricopa.gov>; Kayla Stewart - RISC <kstewart@risc.maricopa.gov>  
Subject: FW: Damage information related to claim # 16200322 with ENTERPRISE

Joey,

This was sent to me and I don't have any information...

Let's discuss later, sorry but I don't have enough information.

-----Original Message-----

From: CODY HULTGREN <e192vd@erac.com>  
Sent: Thursday, October 22, 2020 10:42 PM  
To: Gary Bonkowski - RISCX <gbonkowski@risc.maricopa.gov>  
Subject: Damage information related to claim # 16200322 with ENTERPRISE

Please review the important documentation attached that is related to damage claim #16200322

IMPORTANT: This e-mail (including any attachments) is intended for the use of the individual or entity to which it is addressed and may contain information that is classified, private, or confidential. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is prohibited. If you have received this communication in error, please notify us immediately by replying to this e-mail and then deleting the email and attachments. Thank you.

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## P-CARD PURCHASE REQUISITION FORM

### I. REQUISITION

TODAY'S DATE	DATE NEEDED	MANAGER NAME	FY	DEPT.	DIVISION	DIVISION #
10/1/2020		Gary Bonkowski	21	D210	Logist & Warehouse	2180

### II. PROCUREMENT

VENDOR NAME	ITEM OR SERVICE REQUESTED
Enterprise	Vehicle Rentals for Elections (3 Invoices)

	FUND	AGENCY	UNIT	ACTIVITY	APPROP	OBJECT CODE	TOTAL (\$)
LINE1	100	D210	2180	ELEC	ELE1	8201	\$ 982.60
LINE2							\$ 346.80
LINE3							\$ 1,716.75
							\$ 3,046.15

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

PROCURER SIGNATURE	DATE	RECONCILED SIGNATURE	DATE
<i>Joseph Rodenback</i>	10/1/2020		

### III. BUDGET

BUDGET SIGNATURE	DATE



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9TSYD5**  
**6500-3990-5232**  
**08/21/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 DAY	50.00	100.00
TIME & DISTANCE	3 WK	250.00	750.00
Subtotal			850.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	90.10
VEHICLE LICENSE SURCHARGE	PCT	5.00	42.50

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/30/2020 07:00 AM

**Date/Time In**  
08/21/2020 03:59 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	CH28266	T1LC	7SR8LS	20,694	20,919

**VIN:** 1FTYE1ZM6KKB12051

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**

**Repair Shop**

#### Amount Due (USD)

**982.60**

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#: +1 6023743830  
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)**      982.60

**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**  
9TSYD5

**Amount**  
982.60

**GPBR**  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9YYPNF  
6500-3990-5213  
08/21/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 WK	250.00	250.00
TIME & DISTANCE	1 DAY	50.00	50.00
Subtotal			300.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	15.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	31.80

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
08/14/2020 10:23 AM

Date/Time In  
08/21/2020 03:54 PM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	CL54337	T2LC	7TB8RH	10,712	10,811

VIN: 1FTBR1Y86LKA43328

#### CLAIM INFORMATION

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

#### Amount Due (USD)

346.80

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#: +1 6023743830  
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) 346.80

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  
9YYPNF

Amount  
346.80

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9ZX56R  
6500-4013-0458  
09/08/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	3 DAY	90.00	270.00
TIME & DISTANCE	3 WK	450.00	1,350.00
EXCESS DISTANCE CHARGE	45 DIS	0.20	9.00
DEF	1 RNT	6.00	6.00
Subtotal			1,635.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	81.75

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
08/16/2020 06:59 AM

Date/Time In  
09/08/2020 10:48 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	CL66401	268A	7TXG8L	15,607	15,652

VIN: 5PVTJ8JV5L5S78833

#### CLAIM INFORMATION

Claim# / PO# / RO#      Insured

Date of Loss      Type of Loss      Type of Vehicle

Repair Shop

#### Amount Due (USD)

1,716.75

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#: +1 6023743830  
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) 1716.75

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  
9ZX56R

Amount  
1716.75

GPBR  
508T

## Joseph Rodenback - RISCX

**From:** Mayberry, Jared <Jared.Mayberry@ehi.com>  
**Sent:** Thursday, October 1, 2020 10:35 AM  
**To:** Joseph Rodenback - RISCX  
**Subject:** Payment Screen Shot

Thanks again!

Rental Financial Systems - 801XF TRUCK RENTAL CEN PHOENIX 508T - Internet Explorer

**Accounts Receivable ^A** **Invoices ^I** **Cash Box ^B**

**Payments MARICOPA COUNTY ( L509485 )**

**Credit Card**

Credit Card Number: \*\*\*\*\*7203 Expiration Date: 0123 Card Holder's Name: joseph rodenback Card Brand: VISA

Card Type: CREDIT CARD Transaction Type: PAYMENT Amount: 3,046.15 Auth Number:

**Applied Payments**

Invoice#	Ticket #	Bill	Amount
650039905232	9TSYD5	Ma	\$982.60
650039905213	9YYPNF	Ma	\$346.80
650040130458	9ZX56R	Ma	\$1,716.75

**Totals** \$3,046.15

**Info Messages -- Webpage Dialog**

Select OK to continue.

- Payments
  - Credit Card Sale complete. Total of \$3,046.15 was charged.

**OK**

**Apply Payments** **Swipe Again** **Cancel**

ENTERPRISE HOLDINGS.

Jared Mayberry  
Assistant Manager



Commercial Truck Rental  
Phoenix AZ

602-374-3830 office  
913-660-4200 cell  
602-374-3827 fax  
[Jared.Mayberry@ehi.com](mailto:Jared.Mayberry@ehi.com)

330 N 24th St.  
Phoenix, AZ 85008  
[enterprisetrucks.com](http://enterprisetrucks.com)

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## P-CARD PURCHASE REQUISITION FORM

### I. REQUISITION

TODAY'S DATE	DATE NEEDED	MANAGER NAME	FY	DEPT.	DIVISION	DIVISION #
9/22/2020		John Bolinger/Gary Bonkowski	21	D210	Logist & Warehouse	2180

### II. PROCUREMENT

VENDOR NAME	ITEM OR SERVICE REQUESTED
Enterprise	Vehicle Rentals for Elections (16 Invoices)

	FUND	AGENCY	UNIT	ACTIVITY	APPROP	OBJECT CODE	TOTAL (\$)
LINE1	100	D210	2180	ELEC	ELE1	8201	\$ 17,809.87
LINE2							
LINE3							
							\$ 17,809.87

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

PROCURER SIGNATURE	DATE	RECONCILED SIGNATURE	DATE
<i>Joseph Rodenback</i>	9/22/2020		

### III. BUDGET

BUDGET SIGNATURE	DATE

Accounts Receivable ^A

Invoices ^I

Cash Box ^B



## Payments MARICOPA COUNTY ( L509485 )

## Credit Card

Credit Card Number:

\*\*\*\*\*7203

Expiration Date:

0123

Card Holder's Name:

joseph rodenback

Card Brand:

VISA

Card Type:

CREDIT CARD

Transaction Type:

PAYMENT

Amount:

17,809.87

Auth Number:

Cards on File:

--SELECT--

## Info Messages -- Webpage Dialog

Select OK to continue.

- Payments
  - Credit Card Sale complete. Total of \$17,809.87 was charged.

OK

## Applied Payments

Invoice#	Ticket #	Bill	Amount	Payment
650039778149	9P7LCB	Ma	\$2,206.68	2,206.68
650039747284	9PN0DG	Ma	\$1,156.00	1,156.00
650039803701	9PN1MC	Ma	\$1,637.59	1,637.59
650039748901	9PN64L	Ma	\$1,156.00	1,156.00
650039747212	9PN8SW	Maricopa Integrated Health Sys	\$1,156.00	1,156.00
650039746099	9PNNC4	Maricopa Integrated Health Sys	\$1,156.00	1,156.00
<b>Totals</b>			<b>\$17,809.87</b>	<b>\$17,809.87</b>



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9P7LCB**  
**6500-3977-8149**  
**08/12/2020**  
**L509485**

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/16/2020 08:16 AM

**Date/Time In**  
08/12/2020 02:26 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL97419	268A	7S1JWW	30,544 32,052

**VIN:** 5PVNJ8JV4L4S76819

#### 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	4 WK	450.00	1,800.00
EXCESS DISTANCE CHARGE	1508 DIS	0.20	301.60
	Subtotal		2,101.60
VEHICLE LICENSE SURCHARGE	PCT	5.00	105.08

#### Amount Due (USD)

**2,206.68**

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#: +1 6023743830  
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**  
9P7LCB

**Amount**  
2206.68

**GPBR**  
508T

**Amount Due (USD)**

2206.68

**Paid By:**

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9PN0DG**  
**6500-3974-7284**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/15/2020 06:59 AM

**Date/Time In**  
08/10/2020 01:43 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	497K02	E25C	7SL824	19,385 20,790

**VIN:** 1GCWGBFP7L1130555

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
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)**

1156.00

**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**  
9PN0DG

**Amount**  
1156.00

**GPBR**  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9PN1MC  
6500-3980-3701  
08/14/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
TIME & DISTANCE	3 DAY	50.00	150.00
EXCESS DISTANCE CHARGE	1333 DIS	0.20	266.60
Subtotal			1,416.60
TRANSACTION PRIVILEGE TAX	PCT	10.60	150.16
VEHICLE LICENSE SURCHARGE	PCT	5.00	70.83

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
07/15/2020 06:59 AM

Date/Time In  
08/14/2020 10:23 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

Amount Due (USD) **1,637.59**

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.

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL54337	T2LC	7TB8RH	5,929 10,712

VIN: 1FTBR1Y86LKA43328

#### CLAIM INFORMATION

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

#### For Billing Inquiries / Payment Terms :

Tel#: +1 6023743830  
GP50EFTAR@erac.com  
Payment Due within 30 days of invoice date  
Late payments are subject to a finance charge.



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Amount Due (USD) 1637.59

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  
9PN1MC

Amount  
1637.59

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9PN64L**  
**6500-3974-8901**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/15/2020 06:59 AM

**Date/Time In**  
08/10/2020 02:49 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CM13105	T1LC	7SFT61	6,810 8,598

**VIN:** 1FTYE1ZM0KKB65781

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
GP50EFTAR@erac.com  
Payment Due within 30 days of invoice date  
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**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**  
9PN64L

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

**Paid By:**

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9PN8SW**  
**6500-3974-7212**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/15/2020 06:59 AM

**Date/Time In**  
08/10/2020 01:40 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL97529	T1LC	7SCG2H	7,728 9,822

**VIN:** 1FTYE1ZM6KKB65767

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
GP50EFTAR@erac.com  
Payment Due within 30 days of invoice date  
Late payments are subject to a finance charge.



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**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**  
9PN8SW

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

**Paid By:**

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





330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9PNNC4**  
**6500-3974-6099**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/15/2020 06:59 AM

**Date/Time In**  
08/10/2020 01:05 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CJ94173	E25C	7TLLVL	800 3,477

**VIN:** 1GCWGAFP2L1219363

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
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**  
9PNNC4

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9PNRF9**  
**6500-3974-8176**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/15/2020 06:59 AM

**Date/Time In**  
08/10/2020 02:18 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CM18399	T2LC	7TPPCM	35 2,673

**VIN:** 1FTBR1Y8XLKA69687

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
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**  
9PNRF9

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9Q8RM3  
6500-3984-8473  
08/18/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	450.00	1,800.00
TIME & DISTANCE	2 DAY	90.00	180.00
EXCESS DISTANCE CHARGE	9 DIS	0.20	1.80
DEF	1 RNT	6.00	6.00
Subtotal			1,987.80
VEHICLE LICENSE SURCHARGE	PCT	5.00	99.39

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
07/17/2020 06:59 AM

Date/Time In  
08/16/2020 06:59 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

Amount Due (USD) **2,087.19**

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	CL66401	268A	7TXG8L	15,598 15,607

VIN: 5PVDJ8JV5L5S78833

#### CLAIM INFORMATION

Claim# / PO# / RO#      Insured

Date of Loss      Type of Loss      Type of Vehicle

Repair Shop

#### For Billing Inquiries / Payment Terms :

Tel#: +1 6023743830  
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) 2087.19

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  
9Q8RM3

Amount  
2087.19

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9Q98XZ  
6500-3977-8168  
08/12/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	450.00	1,800.00
EXCESS DISTANCE CHARGE	903 DIS	0.20	180.60
DEF	1 RNT	6.00	6.00
Subtotal			1,986.60
VEHICLE LICENSE SURCHARGE	PCT	5.00	99.33

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
07/17/2020 06:59 AM

Date/Time In  
08/12/2020 02:20 PM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL22034	43CA	7R0VBH	67,777 68,680

VIN: 3HAMMMML9KL159103

#### CLAIM INFORMATION

Claim# / PO# / RO#      Insured

Date of Loss      Type of Loss      Type of Vehicle

Repair Shop

#### Amount Due (USD)

2,085.93

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#: +1 6023743830  
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) 2085.93

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  
9Q98XZ

Amount  
2085.93

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9TR4XL**  
**6500-3974-5968**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	250.00	500.00
Subtotal			500.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	53.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	25.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/30/2020 07:00 AM

**Date/Time In**  
08/10/2020 01:05 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CM13092	T1LC	7SFP4C	11,806 12,822

**VIN:** 1FTYE1ZMXKKB65805

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**  
**Repair Shop**

#### Amount Due (USD)

**578.00**

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#: +1 6023743830  
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**  
9TR4XL

**Amount**  
578.00

**GPBR**  
508T

**Amount Due (USD)**

578.00

**Paid By:**

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9TSL1T**  
**6500-3974-7997**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	250.00	500.00
EXCESS DISTANCE CHARGE	249 DIS	0.20	49.80
Subtotal			549.80
TRANSACTION PRIVILEGE TAX	PCT	10.60	58.28
VEHICLE LICENSE SURCHARGE	PCT	5.00	27.49

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/29/2020 07:00 AM

**Date/Time In**  
08/10/2020 02:11 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CLY4021	NV20	8CM1B7	11,910 13,659

**VIN:** 3N6CM0KN5LK699078

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**

**Repair Shop**

#### Amount Due (USD)

**635.57**

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#: +1 6023743830  
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)**      635.57

**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**  
9TSL1T

**Amount**  
635.57

**GPBR**  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9TT1R6**  
**6500-3974-8749**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	250.00	500.00
EXCESS DISTANCE CHARGE	753 DIS	0.20	150.60
Subtotal			650.60
VEHICLE LICENSE SURCHARGE	PCT	5.00	32.53
TRANSACTION PRIVILEGE TAX	PCT	10.60	68.96

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/29/2020 07:00 AM

**Date/Time In**  
08/10/2020 02:45 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CJ48924	E25C	7TJVY3	11,065 13,318

**VIN:** 1GCVGAFP4L1143435

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**752.09**

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#: +1 6023743830  
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)** 752.09

**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**  
9TT1R6

**Amount**  
752.09

**GPBR**  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9TTJ5H  
6500-3974-8800  
08/10/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 WK	250.00	250.00
TIME & DISTANCE	4 DAY	50.00	200.00
EXCESS DISTANCE CHARGE	105 DIS	0.20	21.00
Subtotal			471.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	49.93
VEHICLE LICENSE SURCHARGE	PCT	5.00	23.55

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
07/31/2020 07:00 AM

Date/Time In  
08/10/2020 02:47 PM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	64879V2	E25C	7SB289	11,954 13,409

VIN: 1GCVGAFP7L1126788

#### CLAIM INFORMATION

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

#### Amount Due (USD)

544.48

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#: +1 6023743830  
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) 544.48

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  
9TTJ5H

Amount  
544.48

GPBR  
508T





330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9TTL92  
6500-3974-5944  
08/10/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 DAY	50.00	200.00
TIME & DISTANCE	1 WK	250.00	250.00
EXCESS DISTANCE CHARGE	498 DIS	0.20	99.60
Subtotal			549.60
TRANSACTION PRIVILEGE TAX	PCT	10.60	58.26
VEHICLE LICENSE SURCHARGE	PCT	5.00	27.48

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
07/31/2020 07:00 AM

Date/Time In  
08/10/2020 01:03 PM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

Amount Due (USD) **635.34**

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	CK91676	T1LC	7SD4BP	20,974 22,822

VIN: 1FTYE1ZM4KKB11738

#### CLAIM INFORMATION

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

#### For Billing Inquiries / Payment Terms :

Tel#: +1 6023743830  
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) 635.34

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  
9TTL92

Amount  
635.34

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9TTMF7**  
**6500-3974-7190**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	250.00	500.00
Subtotal			500.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	25.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	53.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/30/2020 07:00 AM

**Date/Time In**  
08/10/2020 01:39 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	CL97631	E25C	7SCV1R	13,042	13,417

**VIN:** 1GCVGAFPXL1130687

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**  
**Repair Shop**

#### Amount Due (USD)

**578.00**

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#: +1 6023743830  
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)**      578.00

**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**  
9TTMF7

**Amount**  
578.00

**GPBR**  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9WFBWK**  
**6500-3974-8328**  
**08/10/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 WK	250.00	250.00
Subtotal			250.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	12.50
TRANSACTION PRIVILEGE TAX	PCT	10.60	26.50

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
08/06/2020 06:59 AM

**Date/Time In**  
08/10/2020 02:25 PM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	AGYV09	E25C	7S7YSS	19,789 20,335

**VIN:** 1GCVGAFPXL1116420

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**  
**Repair Shop**

#### Amount Due (USD)

**289.00**

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#: +1 6023743830  
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)**      289.00

**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**  
9WFBWK

**Amount**  
289.00

**GPBR**  
508T

## P-CARD PURCHASE REQUISITION FORM

### I. REQUISITION

TODAY'S DATE	DATE NEEDED	MANAGER NAME	FY	DEPT.	DIVISION	DIVISION #
9/9/2020		John Bolinger	21	D210	Logist & Warehouse	2180

### II. PROCUREMENT

VENDOR NAME	ITEM OR SERVICE REQUESTED
Enterprise	QTY: 8 - Vehicle Rentals for Elections

	FUND	AGENCY	UNIT	ACTIVITY	APPROP	OBJECT CODE	TOTAL (\$)
LINE1	100	D210	2180	ELEC	ELE1	8201	\$ 9,594.80
LINE2							
LINE3							
							\$ 9,594.80

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

PROCURER SIGNATURE	DATE	RECONCILED SIGNATURE	DATE
Joseph Rodenback	9/9/2020		

### III. BUDGET

BUDGET SIGNATURE	DATE

Accounts Receivable ^A

Invoices ^I

Cash Box ^B



## Payments MARICOPA COUNTY ( L509485 )

Credit Card

Credit Card Number:

Expiration Date:

Card Holder's Name:

Card Brand:

\*\*\*\*\*7203

0123

joseph rodenback

VISA

Card Type:

Transaction Type:

Amount:

Auth Number:

Cards on File:

CREDIT CARD

PAYMENT

9,594.80

--SELECT--

Applied Payments

Invoice#	Ticket #	Bill	Amount	Payment
650039617256	9K0DTV	Ma	\$1,271.60	1,271.60
650039617200	9JZMMS	Ma	\$1,271.60	1,271.60
650039690940	9MBKTP	Ma	\$1,271.60	1,271.60
650039617498	9KDF4T	Ma	\$1,156.00	1,156.00
650039617453	9KDQ4R	Maricopa Integrated Health Sys	\$1,156.00	1,156.00
650039616763	9JZYZ7	Maricopa Integrated Health Sys	\$1,156.00	1,156.00

## Info Messages -- Webpage Dialog

Select OK to continue.

- Payments
  - Credit Card Sale complete. Total of \$9,594.80 was charged.

OK

Totals

\$9,594.80

\$9,594.80

Apply Payments

Swipe Again

Cancel



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9JZMMS**  
**6500-3961-7200**  
**07/31/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 DAY	50.00	100.00
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,100.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	116.60
VEHICLE LICENSE SURCHARGE	PCT	5.00	55.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/01/2020 10:07 AM

**Date/Time In**  
07/31/2020 07:00 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	64879V2	E25C	7SB289	11,220	11,954

**VIN:** 1GCVGAFP7L1126788

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**

**Repair Shop**

#### Amount Due (USD)

**1,271.60**

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#: +1 6023743830  
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)**      1271.60

**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**  
9JZMMS

**Amount**  
1271.60

**GPBR**  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9JZYZ7**  
**6500-3961-6763**  
**07/31/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/01/2020 10:04 AM

**Date/Time In**  
07/29/2020 07:00 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CJ48924	E25C	7TJVVY3	10,727 11,065

**VIN:** 1GCVGAFP4L1143435

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
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**  
9JZYZ7

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9K0DTV  
6500-3961-7256  
07/31/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
TIME & DISTANCE	2 DAY	50.00	100.00
Subtotal			1,100.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	116.60
VEHICLE LICENSE SURCHARGE	PCT	5.00	55.00

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
07/01/2020 10:14 AM

Date/Time In  
07/31/2020 07:00 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	CK91676	T1LC	7SD4BP	20,035	20,574

VIN: 1FTYE1ZM4KKB11738

#### CLAIM INFORMATION

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

#### Amount Due (USD)

1,271.60

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#: +1 6023743830  
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) 1271.60

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  
9K0DTV

Amount  
1271.60

GPBR  
508T





330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9KDF4T  
6500-3961-7498  
07/31/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
07/02/2020 01:14 PM

Date/Time In  
07/30/2020 07:00 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	CL97631	E25C	7SCV1R	12,679	13,542

VIN: 1GCVGAFPL1130687

#### CLAIM INFORMATION

Claim# / PO# / RO#      Insured

Date of Loss      Type of Loss      Type of Vehicle

Repair Shop

#### Amount Due (USD)

1,156.00

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#: +1 6023743830  
GP50EFTAR@erac.com  
Payment Due within 30 days of invoice date  
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#### 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  
9KDF4T

Amount  
1156.00

GPBR  
508T

#### Amount Due (USD)

1156.00

#### Paid By:

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9KDQ4R**  
**6500-3961-7453**  
**07/31/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/02/2020 01:13 PM

**Date/Time In**  
07/30/2020 07:00 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CH28266	T1LC	7SR8LS	20,919 21,694

**VIN:** 1FTYE1ZM6KKB12051

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
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**  
9KDQ4R

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9KDWF2**  
**6500-3961-4470**  
**07/31/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/02/2020 01:13 PM

**Date/Time In**  
07/30/2020 06:59 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CM13092	T1LC	7SFP4C	10,128 11,806

**VIN:** 1FTYE1ZMXKKB65805

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
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**  
9KDWF2

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

**Paid By:**

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9MBKTP  
6500-3969-0940  
08/06/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
TIME & DISTANCE	2 DAY	50.00	100.00
Subtotal			1,100.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	116.60
VEHICLE LICENSE SURCHARGE	PCT	5.00	55.00

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
07/07/2020 07:00 AM

Date/Time In  
08/06/2020 06:59 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	AGYV09	E25C	7S7YSS	17,873	19,789

VIN: 1GCVGAFPL1116420

#### CLAIM INFORMATION

Claim# / PO# / RO#      Insured

Date of Loss      Type of Loss      Type of Vehicle

Repair Shop

#### Amount Due (USD)

1,271.60

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#: +1 6023743830  
GP50EFTAR@erac.com  
Payment Due within 30 days of invoice date  
Late payments are subject to a finance charge.



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Please Return This Portion With Remittance

Amount Due (USD) 1271.60

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  
9MBKTP

Amount  
1271.60

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9JZDZG**  
**6500-3961-6612**  
**07/31/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
07/01/2020 10:03 AM

**Date/Time In**  
07/29/2020 07:00 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CLY4021	NV20	8CM1B7	10,824 11,910

**VIN:** 3N6CM0KN5LK699078

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**  
**Repair Shop**

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
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**  
9JZDZG

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

**Paid By:**

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

## P-CARD PURCHASE REQUISITION FORM

### I. REQUISITION

TODAY'S DATE	DATE NEEDED	MANAGER NAME	FY	DEPT.	DIVISION	DIVISION #
8/31/2020		John Bolinger	21	D210	Logist & Warehouse	2180

### II. PROCUREMENT

VENDOR NAME	ITEM OR SERVICE REQUESTED
Enterprise	Vehicle Rentals for Elections

	FUND	AGENCY	UNIT	ACTIVITY	APPROP	OBJECT CODE	TOTAL (\$)
LINE1	100	D210	2180	ELEC	1000	8201	\$ 1,932.12
LINE2	100	D210	2180	ELEC	1000	8201	\$ 1,896.63
LINE3							
							\$ 3,828.75

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

PROCURER SIGNATURE	DATE	RECONCILED SIGNATURE	DATE
<i>Joseph Rodenback</i>	8/31/2020		

### III. BUDGET

BUDGET SIGNATURE	DATE

Accounts Receivable ^A

Invoices ^I

Cash Box ^B



## Payments MARICOPA COUNTY ( L509485 )

Credit Card

Credit Card Number:

Expiration Date:

Card Holders Name:

Card Brand:

\*\*\*\*\*7203

0123

joseph rodenback

VISA

Card Type:

Transaction Type:

Amount:

Auth Number:

Cards on File:

CREDIT CARD

PAYMENT

3,828.75

--SELECT--

Applied Payments

Invoice#	Ticket #	Bill
650039458502	9FJWPP	Ma
650039458035	9FK27L	Ma

Info Messages -- Webpage Dialog

Select OK to continue.

- Payments
  - Credit Card Sale complete. Total of \$3,828.75 was charged.

OK

Amount	Payment	
\$1,932.12	1,932.12	X
\$1,896.63	1,896.63	X
Add New Line		

Totals

\$3,828.75

\$3,828.75

Apply Payments

Swipe Again

Cancel



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9FJWPP  
6500-3945-8502  
07/20/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	450.00	1,800.00
EXCESS DISTANCE CHARGE	172 DIS	0.20	34.40
DEF	1 RNT	6.00	6.00
Subtotal			1,840.40
VEHICLE LICENSE SURCHARGE	PCT	5.00	91.72

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
06/19/2020 07:03 AM

Date/Time In  
07/17/2020 06:59 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL22034	43CA	7R0VBH	67,605 67,777

VIN: 3HAMMMML9KL159103

#### CLAIM INFORMATION

Claim# / PO# / RO#      Insured

Date of Loss      Type of Loss      Type of Vehicle

Repair Shop

#### Amount Due (USD)

1,932.12

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#: +1 6023743830  
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) 1932.12

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  
9FJWPP

Amount  
1932.12

GPBR  
508T





330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9FK27L  
6500-3945-8035  
07/20/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	450.00	1,800.00
EXCESS DISTANCE CHARGE	3 DIS	0.20	0.60
DEF	1 RNT	6.00	6.00
Subtotal			1,806.60
VEHICLE LICENSE SURCHARGE	PCT	5.00	90.03

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
06/19/2020 07:01 AM

Date/Time In  
07/17/2020 06:59 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL66401	268A	7TXG8L	15,595 15,598

VIN: 5PVNJ8JV5L5S78833

#### CLAIM INFORMATION

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

#### Amount Due (USD)

1,896.63

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#: +1 6023743830  
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) 1896.63

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  
9FK27L

Amount  
1896.63

GPBR  
508T

## P-CARD PURCHASE REQUISITION FORM

### I. REQUISITION

TODAY'S DATE	DATE NEEDED	MANAGER NAME	FY	DEPT.	DIVISION	DIVISION #
8/20/2020		John Bolinger	20	D210	Logist & Warehouse	2180

### II. PROCUREMENT

VENDOR NAME	ITEM OR SERVICE REQUESTED
Enterprise	Vehicle Rental for Elections

	FUND	AGENCY	UNIT	ACTIVITY	APPROP	OBJECT CODE	TOTAL (\$)
LINE1	100	D210	2180	ELEC	ELE1	8201	\$ 8,695.66
LINE2							
LINE3							
							\$ 8,695.66

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

PROCURER SIGNATURE	DATE	RECONCILED SIGNATURE	DATE
<i>Joseph Rodenback</i>	8/20/2020		

### III. BUDGET

BUDGET SIGNATURE	DATE



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9BQDWQ  
6500-3933-0268  
07/09/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
06/09/2020 11:21 AM

Date/Time In  
07/07/2020 06:59 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	AGYV09	E25C	7S7YSS	17,864 17,873

VIN: 1GCWGAFPXL1116420

#### CLAIM INFORMATION

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

#### Amount Due (USD)

1,156.00

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#: +1 6023743830  
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) 1156.00

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  
9BQDWQ

Amount  
1156.00

GPBR  
508T



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9DXL4B**  
**6500-3942-9089**  
**07/17/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
06/17/2020 08:44 AM

**Date/Time In**  
07/15/2020 06:59 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL97529	T1LC	7SCG2H	7,722 7,728

**VIN:** 1FTYE1ZM6KKB65767

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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#: +1 6023743830  
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**  
9DXL4B

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9DXSC7**  
**6500-3942-9539**  
**07/17/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
06/17/2020 09:03 AM

**Date/Time In**  
07/15/2020 06:59 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	497K02	E25C	7SL824	19,375 19,385

**VIN:** 1GCWGBFP7L1130555

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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.

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DALLAS, TX 75284-

**Email Remit To:** AskNationalPayments@ehi.com

**Fed Tax Id:** 86-0408806

**Account #**  
L509485

**Rental Agreement**  
9DXSC7

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9DXX5W**  
**6500-3942-9349**  
**07/17/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
06/17/2020 08:55 AM

**Date/Time In**  
07/15/2020 06:59 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CL54337	T2LC	7TB8RH	5,926 5,929

**VIN:** 1FTBR1Y86LKA43328

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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.

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**Email Remit To:** AskNationalPayments@ehi.com

**Fed Tax Id:** 86-0408806

**Account #**  
L509485

**Rental Agreement**  
9DXX5W

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

**Paid By:**

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9DXX46**  
**6500-3942-9269**  
**07/17/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
06/17/2020 08:53 AM

**Date/Time In**  
07/15/2020 06:59 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CM13105	T1LC	7SFT61	6,807 6,810

**VIN:** 1FTYE1ZM0KKB65781

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**

**Repair Shop**

#### Amount Due (USD)

**1,156.00**

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.

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GP50EFTAR@erac.com  
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**Email Remit To:** AskNationalPayments@ehi.com

**Fed Tax Id:** 86-0408806

**Account #**  
L509485

**Rental Agreement**  
9DXX46

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9DY0LK**  
**6500-3942-9631**  
**07/17/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
06/17/2020 09:05 AM

**Date/Time In**  
07/15/2020 06:59 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
WHITE	CJ94173	E25C	7TLLVL	21	24

**VIN:** 1GCWGAFP2L1219363

#### CLAIM INFORMATION

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

#### Amount Due (USD)

**1,156.00**

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.

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GP50EFTAR@erac.com  
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DALLAS, TX 75284-

**Email Remit To:** AskNationalPayments@ehi.com

**Fed Tax Id:** 86-0408806

**Account #**  
L509485

**Rental Agreement**  
9DY0LK

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

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





330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

**9DYPQM**  
**6500-3942-9717**  
**07/17/2020**  
**L509485**

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	4 WK	250.00	1,000.00
Subtotal			1,000.00
TRANSACTION PRIVILEGE TAX	PCT	10.60	106.00
VEHICLE LICENSE SURCHARGE	PCT	5.00	50.00

#### BILL TO

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

#### RENTAL INFORMATION

**Date/Time Out**  
06/17/2020 09:47 AM

**Date/Time In**  
07/15/2020 06:59 AM

**Renter**  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CM18399	T2LC	7TPPCM	32 35

**VIN:** 1FTBR1Y8XLKA69687

#### CLAIM INFORMATION

**Claim# / PO# / RO#**      **Insured**

**Date of Loss**      **Type of Loss**      **Type of Vehicle**

**Repair Shop**

#### Amount Due (USD)

**1,156.00**

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.

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L509485

**Rental Agreement**  
9DYPQM

**Amount**  
1156.00

**GPBR**  
508T

**Amount Due (USD)**

1156.00

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



330 N 24TH ST  
PHOENIX, AZ 85008-6012

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

9KDF51  
6500-3941-2297  
07/16/2020  
L509485

#### BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	2 WK	250.00	500.00
REFUELING CHARGE	6 GAL	3.70	22.20
Subtotal			522.20
TRANSACTION PRIVILEGE TAX	PCT	10.60	55.35
VEHICLE LICENSE SURCHARGE	PCT	5.00	26.11

#### BILL TO

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

#### RENTAL INFORMATION

Date/Time Out  
07/02/2020 01:14 PM

Date/Time In  
07/16/2020 08:22 AM

Renter  
MARICOPA COUNTY ELECTIONS, JOHN BOLLINGER

#### RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out In
WHITE	CM13011	T1LC	7SJF56	15,460 15,745

VIN: 1FTYE1ZM8KKB76933

#### CLAIM INFORMATION

Claim# / PO# / RO#      Insured

Date of Loss      Type of Loss      Type of Vehicle

Repair Shop

#### Amount Due (USD)

603.66

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#: +1 6023743830  
GP50EFTAR@erac.com  
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Amount Due (USD)

603.66

#### 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  
9KDF51

Amount  
603.66

GPBR  
508T

## Joseph Rodenback - RISCX

---

**From:** Mayberry, Jared <Jared.Mayberry@ehi.com>  
**Sent:** Wednesday, August 26, 2020 9:30 AM  
**To:** Joseph Rodenback - RISCX  
**Subject:** RE: Enterprise Invoices

Joey,

This is what accounting just emailed me: "Unfortunately RFS does not generate receipts. What we can do is if you give us the type of card, first 6 and last 4 we can send over a report that shows the charges taken at a period of time."

---

**From:** Joseph Rodenback - RISCX <jrodenback@risc.maricopa.gov>  
**Sent:** Wednesday, August 26, 2020 8:44 AM  
**To:** Mayberry, Jared <Jared.Mayberry@ehi.com>  
**Subject:** RE: Enterprise Invoices

Jared,

No problem. I'm sure we'll figure something out.

Thanks,

Joey Rodenback  
Maricopa County Recorder/Elections  
[jrodenback@risc.maricopa.gov](mailto:jrodenback@risc.maricopa.gov)

---

**From:** Mayberry, Jared <[Jared.Mayberry@ehi.com](mailto:Jared.Mayberry@ehi.com)>  
**Sent:** Wednesday, August 26, 2020 8:32 AM  
**To:** Joseph Rodenback - RISCX <[jrodenback@risc.maricopa.gov](mailto:jrodenback@risc.maricopa.gov)>  
**Subject:** RE: Enterprise Invoices

Joey,

I just emailed my accounting department again to see if they can get me some sort of receipt. My apologies for this not being easily attainable.

---

**From:** Joseph Rodenback - RISCX <[jrodenback@risc.maricopa.gov](mailto:jrodenback@risc.maricopa.gov)>  
**Sent:** Wednesday, August 26, 2020 8:14 AM  
**To:** Mayberry, Jared <[Jared.Mayberry@ehi.com](mailto:Jared.Mayberry@ehi.com)>  
**Subject:** RE: Enterprise Invoices

Hi Jared,

I haven't received an e-mailed receipt for the payment from last week. Did you happen to have that?

Thanks,

Joey Rodenback  
Maricopa County Recorder/Elections  
[jrodenback@risc.maricopa.gov](mailto:jrodenback@risc.maricopa.gov)

---

**From:** Joseph Rodenback - RISCX  
**Sent:** Thursday, August 20, 2020 2:38 PM  
**To:** 'Mayberry, Jared' <[Jared.Mayberry@ehi.com](mailto:Jared.Mayberry@ehi.com)>  
**Subject:** RE: Enterprise Invoices

Hi Jared,

No problem! Am I able to pay these via credit card?

Thanks,

Joey Rodenback  
Maricopa County Recorder/Elections  
[jrodenback@risc.maricopa.gov](mailto:jrodenback@risc.maricopa.gov)

---

**From:** Mayberry, Jared <[Jared.Mayberry@ehi.com](mailto:Jared.Mayberry@ehi.com)>  
**Sent:** Wednesday, August 19, 2020 12:24 PM  
**To:** Joseph Rodenback - RISCX <[jrodenback@risc.maricopa.gov](mailto:jrodenback@risc.maricopa.gov)>  
**Subject:** Enterprise Invoices

Joey,

Thanks for reaching out so quickly. I have attached all of the invoices that are over 30 days. I will send the other invoices that are more recent either tomorrow or Friday. Please let me know if you need anything else.

Thank you,



**Jared Mayberry**  
Assistant Manager  
Commercial Truck Rental  
Phoenix AZ

602-374-3830 office  
913-660-4200 cell  
602-374-3827 fax  
[Jared.Mayberry@ehi.com](mailto:Jared.Mayberry@ehi.com)

330 N 24th St.  
Phoenix, AZ 85008  
[enterprisetrucks.com](http://enterprisetrucks.com)

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