STATEMENT OF ACCOUNT

Harold Lemay Enterprises, Inc., d/b/a Butlers Cove Refuse Service; City Sanitar

Receivable ID: 6341

Docket #: TG-210310

Approved Payment Plan

4111 192nd St. E

Tacoma, WA 98446

UTC Contact: Dotson, Mike Date Due: 15 days after order

Date	Receipt ID	Payment ID	Description	Due	Credit	Balance	Date - Copy was given to Records Center
	Balance brought forward					\$0.00	
05/21/21	Violated (WAC) 480-70-201, vehicle and driver safety requirements		Penalty	6/7/2021		\$300.00	
06/04/21	072444	V17336	Penalty	6/7/2021	(\$300.00)	\$0.00	