



Account Number
650830063

Billing Date
March 8, 2013

Page 1 of 2



**Billing Questions and
On-Line Payments:**
Phone: 1-800-422-1234
Web: DexeBill.com



Mail Payments To:
Dex Media West, Inc
PO Box 79167
Phoenix, AZ 85062-9167



**To Report an Error in
Your Advertising:**
1-800-422-1234



**Mail Correspondence
Other than Payments to:**
Dex
Attn: Client Care
PO Box 3900
Peoria, IL 61612
Dexoneinfo@Dexone.com

Customer Information:
LONE PALM R.V. & STORAGE
FRANK & KATHLEEN CHERNEK
2554 W 16TH STREET #225
YUMA AZ 85364-4229
1-928-783-4936

Date Due	March 26, 2013
Current Amount Due	\$8.64

Account Summary

Previous Balance	33.51
Payments Received	-33.51
Current Product Charges	8.50
Taxes	0.14

Current Amount Due **\$8.64**

**Visit us at www.DexeBill.com. You can view invoices, receive
invoices electronically, and make payments on-line.**

Dex

Please return this portion with payment.



Check and complete information
on back if changing address or
paying by direct debit or credit card.

Account Number: 650830063
Date Due: March 26, 2013
Current Amount Due: \$8.64

Make checks
payable to:

1-1 1

**LONE PALM R.V. & STORAGE
FRANK & KATHLEEN CHERNEK
2554 W 16TH STREET #225
YUMA AZ 85364-4229**

**DEX MEDIA WEST, INC
PO BOX 79167
PHOENIX, AZ 85062-9167**



Account Number
650830063

Billing Date
March 8, 2013

Page 2 of 2

Payments

Payments Received - Thank You			
Check	02/25/13	734	33.51
Total Payments Received			\$33.51

Current Product Charges

Product	Product Duration	Activity Date	Description	Amount Due	
Yuma -Yellow	03/09/12 - 03/08/13	03/01/13 - 03/08/13	Advertising Charge	8.50	P
Total Current Product Charges				\$8.50	

Taxes

Product	Tax Applied
Yuma -Yellow	0.14
Total Taxes	\$0.14

Information from your business partner, Dex

Speak Spanish? Let your customers know! Update your DexKnows.com business profile with all the languages you speak. Log in at Account.DexKnows.com to edit your profile. Click 'Traits & Qualities' then check the boxes for your languages.

P -- Includes prorated charges for portion of billing period that does not equal one whole month.

-- Taxable amount. See the tax section for total taxes by state or local authority.



If you would like to pay via Direct Debit:

Check One ☐ Charge a one time payment of \$ _____
☐ Setup automatic charge on due date for all future billing

Financial Institution Name _____

ABA Transit Routing Number _____

Bank Account Number _____

Name on Bank Account _____

Authorized Signature _____

If you would like to pay via Credit Card:

Check One ☐ Charge a one time payment of \$ _____
☐ Setup automatic charge on due date for all future billing

Card Type ☐ AMEX ☐ MasterCard ☐ Visa ☐ Discover

Card's Billing Address _____

City _____ State _____ Zip _____

Card Number _____

Expiration Date _____

Name on Card _____

Authorized Signature _____

By supplying this information and completing the transaction, I hereby authorize Dex Media West Inc. to initiate a debit against the above Account in the above amount to the above Account Number at the Financial Institution named above, and to debit the same to such Account. I acknowledge that the origination of direct debit transactions to my Account must comply with the provisions of U.S. law. (All payments are in U.S. dollars and from a U.S. Bank.) If you are electing to pay via direct debit please make sure the account information you provide is for payments to be made from a business account. If a business account is not available, you should consider an alternate payment method.

Please Print Changes in Name or Address:

Name _____

Address _____

City _____ State _____ Zip _____

Reason for Change:

☐ Change of Ownership

☐ Other _____