

Fill in this information to identify the case:

Debtor 1 Gold's Holding Corp.

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Texas, Amarillo Division

Case number 20-31320-hdh11

E-Filed on 07/29/2020
Claim # 191

Official Form 410

Proof of Claim

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?		<u>ThyssenKrupp Elevator Corp.</u> Name of the current creditor (the person or entity to be paid for this claim)	
		Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)	
	<u>c/o Law Office of D. Park Smith</u> Name <u>250 Cherry Springs Road, Suite 200</u> Number Street <u>Hunt TX 78024</u> City State ZIP Code Contact phone <u>(830) 238-3591</u> Contact email <u>park@dparksmithlaw.com</u> Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	_____ Name _____ Number Street _____ City State ZIP Code Contact phone _____ Contact email _____	
4. Does this claim amend one already filed?		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) <u>151</u> Filed on <u>07/09/2020</u> MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? ☐ No ☒ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 8 5 9 4

7. How much is the claim? \$ 14,097.82. Does this amount include interest or other charges? ☒ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.
- Services Performed

9. Is all or part of the claim secured? ☒ No ☐ Yes. The claim is secured by a lien on property.
- Nature of property:**
- ☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
- ☐ Motor vehicle
- ☐ Other. Describe: _____
- Basis for perfection:** _____
- Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
- Value of property:** \$ _____
- Amount of the claim that is secured:** \$ _____
- Amount of the claim that is unsecured:** \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)
- Amount necessary to cure any default as of the date of the petition:** \$ _____
- Annual Interest Rate** (when case was filed) _____ %
- ☐ Fixed
- ☐ Variable

10. Is this claim based on a lease? ☒ No ☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ 0.00

11. Is this claim subject to a right of setoff? ☒ No ☐ Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ No

☐ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

☐ Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

☐ Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

☐ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

Amount entitled to priority

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☒ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 07/29/2020
MM / DD / YYYY

D. Park Smith

Signature

Print the name of the person who is completing and signing this claim:

Name D. Park Smith
First name Middle name Last name

Title Attorney for ThyssenKrupp Elevator Corp.

Company
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address
Number Street

City State ZIP Code

Contact phone Email

Attachment 1 - TKE #118594 Invoices Amended.pdf

Description -

NTL-Golds Gym International - 118594

Branch Name	Due Date	Reference	Transaction Date	Transaction	LOB	Original Amount	Remaining Amount	Days Late	Ship To Location
AUSTIN	5/31/20	US179631	5/1/20	3005220063	40	\$ 468.00	\$ 468.00	32	GOLD'S GYM AUSTIN DOWNTOWN
AUSTIN	4/23/20	771602/US34125	3/24/20	6000432746	50	\$ 410.00	\$ 410.00	70	GOLDS GYM BEE CAVES
AUSTIN	4/23/20	774087/US34124	3/24/20	6000432727	50	\$ 410.00	\$ 410.00	70	GOLDS GYM SOUTH
AUSTIN	3/15/20	761295/US179631	2/14/20	6000424797	50	\$ 1,569.00	\$ 1,569.00	109	GOLD'S GYM AUSTIN DOWNTOWN
							\$ 2,857.00		

NTL-Golds Gym International - 118594

Branch Name	Due Date	Reference	Transaction Date	Transaction	LOB	Original Amount	Remaining Amount	Days Late	Ship To Location
OKLAHOMA CITY	3/15/20	763461	2/14/20	6000424734	50	\$ 1,342.00	\$ 1,342.00	109	GOLDS GYM - WEST EDMOND
OKLAHOMA CITY	1/31/20	US153344	1/1/20	3005008596	40	\$ 1,398.60	\$ 1,260.00	153	GOLDS GYM - WEST EDMOND
							\$ 2,602.00		

NTL-Golds Gym International - 118594

Branch Name	Due Date	Reference	Transaction Date	Transaction	LOB	Original Amount	Remaining Amount	Days Late	Ship To Location
SAN ANTONIO	4/4/20	773499/US177031	3/5/20	6000429356	50	\$ 425.00	\$ 425.00	89	ROGERS RANCH #43049
SAN ANTONIO	3/14/20	47923980/US32984	2/13/20	5001227572	45	\$ 301.44	\$ 301.44	110	GOLDS GYM LIVE OAK
SAN ANTONIO	2/27/20	758845/US32984	1/28/20	6000421074	50	\$ 425.00	\$ 425.00	126	GOLDS GYM LIVE OAK
SAN ANTONIO	2/27/20	758855/US135537	1/28/20	6000421068	50	\$ 425.00	\$ 425.00	126	GOLDS GYM ALAMO QUARRY
							\$ 1,576.44		

NTL-Golds Gym International-118594

Branch Name	Due Date	Reference	Transaction Date	Transaction	LOB	Original Amount	Remaining Amount	Paid ?	Days Late	Ship To Location	Ship To Address
NORTHERN VIRGINIA	4/18/20	48617744	3/19/20	5001245804	45	\$ 162.50	\$ 162.50		97	GOLDS GYM #46008	3910 WILSON BLVD
NORTHERN VIRGINIA Total							\$ 162.50				

NTL-Golds Gym International-118594

NTL-Golds Gym International-118594										
WASHINGTON DC	4/17/20	768977	3/18/20	6000431538	50	\$1,917.63	\$1,917.63	98	GOLDS GYM VAN NESS	4310 CONNECTICUT AVE NW
WASHINGTON DC	2/8/20	47018182	1/9/20	5001207251	45	\$2,707.25	\$2,707.25	167	GOLDS GYM-ROCKVILLE	5520 RANDOLPH RD
WASHINGTON DC	1/17/20	46655704	12/18/19	5001196406	45	\$ 910.00	\$ 910.00	189	GOLDS GYM-ROCKVILLE	5520 RANDOLPH RD
WASHINGTON DC	1/17/20	46655704	12/18/19	5001196406	45	\$ 910.00	\$ 910.00	189	GOLDS GYM-ROCKVILLE	5520 RANDOLPH RD
WASHINGTON DC	1/4/20	46282898	12/5/19	5001190665	45	\$ 682.50	\$ 682.50	202	GOLDS GYM-ROCKVILLE	5520 RANDOLPH RD
WASHINGTON DC	11/30/19	45512946	10/31/19	5001173552	45	\$ 682.50	\$ 682.50	237	GOLDS GYM-ROCKVILLE	5520 RANDOLPH RD
WASHINGTON DC Total							\$6,899.88			

MAINTENANCE INVOICE

INVOICE DATE:	5/1/2020
CUSTOMER #:	118594
JOB #:	US179631
INVOICE #:	3005220063
PO #:	
SERVICE DATE:	05/01/2020 TO 06/30/2020
TERMS:	30 Days Net
TOTAL DUE:	\$468.00



TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

SHIP TO:
GOLD'S GYM AUSTIN DOWNTOWN
115 E 6TH ST
AUSTIN TX 78701-3651

ITEM	QUANTITY	DESCRIPTION	EXTENDED AMOUNT		
C301US	3	AUSTIN BRANCH This is a billing for the service period referenced above. Bronze - Oil & Grease ONLY, Pay for all Callbacks - Elevator GOLD'S GYM AUSTIN DOWNTOWN	\$468.00		
<div>ATTENTION: We are moving to a new bank and have a new remittance address. Please update your records to reflect our new remittance address. You can also contact us at ARsupport@thyssenkrupp.com to set up ACH payments, which is our preferred payment method. Visit our online portal to view, print and pay your bills online. Look for your enrollment token on this bill and visit https://thyssenkruppelevator.billtrust.com</div>					
AMOUNT		DISCOUNT	SUBTOTAL	SALES TAX	PLEASE PAY
\$468.00		\$0.00	\$468.00	\$0.00	\$468.00

For Service Related or General Questions, please call 512-447-9511. For Billing or Payment questions, please call 678-424-5636.

Goods or services covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended.

RETURN THIS PORTION WITH YOUR PAYMENT IN THE ENVELOPE PROVIDED WITH THE REMITTANCE ADDRESS VISIBLE



INVOICE DATE:	5/1/2020
CUSTOMER #:	118594
JOB #:	US179631
INVOICE #:	3005220063
PO #:	
SERVICE DATE:	05/01/2020 TO 06/30/2020
TERMS:	30 Days Net
TOTAL DUE:	468.00

NTL-GOLDS GYM INTERNATIONAL
Amount Enclosed: \$ _____

Amount Enclosed: \$ _____

Payment Method	
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed <input type="checkbox"/> Cashiers Check Enclosed

Please Make Check Payment To:
thyssenkrupp Elevator Corporation

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

[illegible]



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 03/24/2020
CUSTOMER #: 118594
REPAIR #: 771602
INVOICE #: 6000432746
PO #: SIGNED PROPOSAL
OPPORTUNITY ID: ACIA-1OOCGIO
TERMS: 30 Days Net
TOTAL DUE: 410.00

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
3100 INTERSTATE NORTH CIR SE STE 600
ATLANTA GA 30339-2227

DESCRIPTION				AMOUNT	
AUSTIN BRANCH					
Contract Detail:	ORIGINAL CONTRACT PRICE		\$410.00		
	CHANGE ORDERS		\$0.00		
	TOTAL CONTRACT PRICE		\$410.00		
	LESS PREVIOUS BILLINGS		\$0.00		
	BILLABLE AMOUNT REMAINING		\$410.00		
Installment Number: 1					\$410.00
Billing Amount:					
Ship To: GOLDS GYM BEE CAVES 12480 FM 2244, AUSTIN, TX					
Serial #: US90914 Unit: 1					
Safety Test					
AMOUNT	SALES TAX	SUBTOTAL	LESS DEPOSIT	PLEASE PAY THIS AMOUNT	
\$410.00	\$0.00	\$410.00	\$0.00	\$410.00	

For Service Related or General Questions, please call 512-447-9511. For Billing or Payment Questions, please call 678-424-5636.

RETURN THIS PORTION WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 03/24/2020
CUSTOMER #: 118594
REPAIR #: 771602
INVOICE #: 6000432746
PO #: SIGNED PROPOSAL
OPPORTUNITY ID: ACIA-1OOCGIO
TERMS: 30 Days Net
TOTAL DUE: 410.00

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

Amount Enclosed: \$

Payment Method		
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed	<input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To:		
thyssenkrupp Elevator Corporation		



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 03/24/2020
CUSTOMER #: 118594
REPAIR #: 774087
INVOICE #: 6000432727
PO #: PM-0135219
OPPORTUNITY ID: ACIA-10OCN14
TERMS: 30 Days Net
TOTAL DUE: 410.00

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
3100 INTERSTATE NORTH CIR SE STE 600
ATLANTA GA 30339-2227

DESCRIPTION				AMOUNT	
AUSTIN BRANCH					
Contract Detail:	ORIGINAL CONTRACT PRICE		\$410.00		
	CHANGE ORDERS		\$0.00		
	TOTAL CONTRACT PRICE		\$410.00		
	LESS PREVIOUS BILLINGS		\$0.00		
	BILLABLE AMOUNT REMAINING		\$410.00		
Installment Number: 1					\$410.00
Billing Amount:					
Ship To: GOLDS GYM SOUTH 4404 W WILLIAM CANNON DR, AUSTIN, TX					
Serial #: US90913 Unit: 1					
SAFETY TEST					
AMOUNT	SALES TAX	SUBTOTAL	LESS DEPOSIT	PLEASE PAY THIS AMOUNT	
\$410.00	\$0.00	\$410.00	\$0.00	\$410.00	

For Service Related or General Questions, please call 512-447-9511. For Billing or Payment Questions, please call 678-424-5636.

RETURN THIS PORTION WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 03/24/2020
CUSTOMER #: 118594
REPAIR #: 774087
INVOICE #: 6000432727
PO #: PM-0135219
OPPORTUNITY ID: ACIA-10OCN14
TERMS: 30 Days Net
TOTAL DUE: 410.00

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

Amount Enclosed: \$ _____

Payment Method		
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed	<input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To:		
thyssenkrupp Elevator Corporation		



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 02/14/2020
CUSTOMER #: 118594
REPAIR #: 761295
INVOICE #: 6000424797
PO #: 0133855
OPPORTUNITY ID: ACIA-1O6BHN2
TERMS: 30 Days Net
TOTAL DUE: 1,569.00

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

DESCRIPTION				AMOUNT
AUSTIN BRANCH				
Contract Detail:	ORIGINAL CONTRACT PRICE		\$1,569.00	\$1,569.00
	CHANGE ORDERS		\$0.00	
	TOTAL CONTRACT PRICE		\$1,569.00	
	LESS PREVIOUS BILLINGS		\$0.00	
	BILLABLE AMOUNT REMAINING		\$1,569.00	
Installment Number: 2				
Billing Amount:				
Ship To: GOLD'S GYM AUSTIN DOWNTOWN 115 E 6TH ST, AUSTIN, TX				
Serial #: US345137 Unit: 2 FRONT LIFT SAFETY TEST				
Ship To: GOLD'S GYM AUSTIN DOWNTOWN 115 E 6TH ST, AUSTIN, TX				
Serial #: US385777 Unit: 4 BACK LIFT				
AMOUNT	SALES TAX	SUBTOTAL	LESS DEPOSIT	PLEASE PAY THIS AMOUNT
\$1,569.00	\$0.00	\$1,569.00	\$0.00	\$1,569.00

For Service Related or General Questions, please call 512-447-9511. For Billing or Payment Questions, please call 678-424-5636.

RETURN THIS PORTION WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 02/14/2020
CUSTOMER #: 118594
REPAIR #: 761295
INVOICE #: 6000424797
PO #: 0133855
OPPORTUNITY ID: ACIA-1O6BHN2
TERMS: 30 Days Net
TOTAL DUE: 1,569.00

REMIT PAYMENT TO:

Amount Enclosed: \$ _____

Payment Method		
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed	<input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To: thyssenkrupp Elevator Corporation		

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 02/14/2020
CUSTOMER #: 118594
REPAIR #: 761295
INVOICE #: 6000424797
PO #: 0133855
OPPORTUNITY ID: ACIA-106BHN2
TERMS: 30 Days Net
TOTAL DUE: 1,569.00

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

DESCRIPTION	AMOUNT
SAFETY TEST	
<p>Ship To: GOLD'S GYM AUSTIN DOWNTOWN 115 E 6TH ST, AUSTIN, TX</p> <p>Serial #: US385779 Unit: 3 MIDDLE LIFT</p> <p>SAFETY TEST</p>	



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 02/14/2020
CUSTOMER #: 118594
REPAIR #: 763461
INVOICE #: 6000424734
PO #: POWEB-236047
OPPORTUNITY ID: ACIA-1NZOZQA
TERMS: 30 Days Net
TOTAL DUE: 1,342.00

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

DESCRIPTION				AMOUNT
OKLAHOMA CITY BRANCH				
Contract Detail:		ORIGINAL CONTRACT PRICE	\$1,342.00	\$1,342.00
		CHANGE ORDERS	\$0.00	
		TOTAL CONTRACT PRICE	\$1,342.00	
		LESS PREVIOUS BILLINGS	\$0.00	
		BILLABLE AMOUNT REMAINING	\$1,342.00	
Installment Number: 2				
Billing Amount:				
Ship To:		GOLDS GYM - WEST EDMOND		
		2121 W DANFORTH RD, EDMOND, OK		
Serial #:	US346987	Unit: 1		
INSTALL ADA PHONE				
AMOUNT	SALES TAX	SUBTOTAL	LESS DEPOSIT	PLEASE PAY THIS AMOUNT
\$1,342.00	\$0.00	\$1,342.00	\$0.00	\$1,342.00

For Service Related or General Questions, please call 405-949-1916. For Billing or Payment Questions, please call 678-424-5641.

RETURN THIS PORTION WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 02/14/2020
CUSTOMER #: 118594
REPAIR #: 763461
INVOICE #: 6000424734
PO #: POWEB-236047
OPPORTUNITY ID: ACIA-1NZOZQA
TERMS: 30 Days Net
TOTAL DUE: 1,342.00

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

Amount Enclosed: \$

Payment Method		
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed	<input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To:		
thyssenkrupp Elevator Corporation		



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

MAINTENANCE INVOICE

INVOICE DATE:	01/01/2020
CUSTOMER #:	118594
JOB #:	US153344
INVOICE #:	3005008596
PO #:	
SERVICE DATE:	01/01/2020 TO 06/30/2020
TERMS:	30 Days Net
TOTAL DUE:	\$1,398.60



BILL TO:

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600 GOLDSGYMR
ATLANTA GA 30339-2227

SHIP TO:
GOLDS GYM - WEST EDMOND
2121 W DANFORTH RD
EDMOND OK 73003

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

ITEM	QUANTITY	DESCRIPTION	EXTENDED AMOUNT		
C121US	1	OKLAHOMA CITY BRANCH This is a billing for the service period referenced above. Gold - Full Maintenance, Customer pays full amount of Overtime - Elevator GOLDS GYM - WEST EDMOND	\$1,398.60		
<div><p>ATTENTION: We are moving to a new bank and have a new remittance address.</p><p>Please update your records to reflect our new remittance address. You can also contact us at ARsupport@thyssenkrupp.com to set up ACH payments, which is our preferred payment method.</p><p>Visit our online portal to view, print and pay your bills online. Look for your enrollment token on this bill and visit</p><p>https://thyssenkruppelevator.billtrust.com</p></div>					
AMOUNT		DISCOUNT	SUBTOTAL	SALES TAX	PLEASE PAY
\$1,398.60		\$0.00	\$1,398.60	\$0.00	\$1,398.60

For Service Related or General Questions, please call 405-949-1916. For Billing or Payment questions, please call 678-424-5641.

Goods or services covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended.

RETURN THIS PORTION WITH YOUR PAYMENT IN THE ENVELOPE PROVIDED WITH THE REMITTANCE ADDRESS VISIBLE



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE:	01/01/2020
CUSTOMER #:	118594
JOB #:	US153344
INVOICE #:	3005008596
PO #:	
SERVICE DATE:	01/01/2020 TO 06/30/2020
TERMS:	30 Days Net
TOTAL DUE:	1,398.60

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

NTL-GOLDS GYM INTERNATIONAL

Amount Enclosed: \$ _____

Amount Enclosed: \$	
Payment Method	
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed <input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To: thyssenkrupp Elevator Corporation	

[illegible]



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 03/05/2020
CUSTOMER #: 118594
REPAIR #: 773499
INVOICE #: 6000429356
PO #: SINGED WO
OPPORTUNITY ID: ACIA-1005XFP
TERMS: 30 Days Net
TOTAL DUE: 425.00

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

DESCRIPTION				AMOUNT
SAN ANTONIO BRANCH				
Contract Detail:	ORIGINAL CONTRACT PRICE		\$425.00	\$425.00
	CHANGE ORDERS		\$0.00	
	TOTAL CONTRACT PRICE		\$425.00	
	LESS PREVIOUS BILLINGS		\$0.00	
	BILLABLE AMOUNT REMAINING		\$425.00	
Installment Number: 1				
Billing Amount:				
Ship To: ROGERS RANCH #43049 2711 TREBLE CREEK, SAN ANTONIO, TX				
Serial #: US624429 Unit: CAR 1				
Safety Test				
AMOUNT	SALES TAX	SUBTOTAL	LESS DEPOSIT	PLEASE PAY THIS AMOUNT
\$425.00	\$0.00	\$425.00	\$0.00	\$425.00

For Service Related or General Questions, please call 210-495-8585. For Billing or Payment Questions, please call 678-424-3636.

RETURN THIS PORTION WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 03/05/2020
CUSTOMER #: 118594
REPAIR #: 773499
INVOICE #: 6000429356
PO #: SINGED WO
OPPORTUNITY ID: ACIA-1005XFP
TERMS: 30 Days Net
TOTAL DUE: 425.00

REMIT PAYMENT TO:

Amount Enclosed: \$

Payment Method		
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed	<input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To:		
thyssenkrupp Elevator Corporation		

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 02/13/2020
CUSTOMER #: 118594
SR #: 47923980
INVOICE #: 5001227572
PO #: WEB-238645
TERMS: 30 Days Net
TOTAL DUE: 301.44

TO VIEW AND PAY ONLINE GO TO: <https://thyssenkruppelevator.billtrust.com>
USE THIS ENROLLMENT TOKEN: PMM RKW PWV

BILL TO:

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

SHIP TO:

GOLDS GYM LIVE OAK
7937 PAT BOOKER RD
LIVE OAK, TX 78233-2602

Reported By: GUSTAVO CANTU, 210-637-6600 on 02/06/2020 11:03:08

Resolution Summary: CUSTOMER REPORTED ELEVATOR UPSTAIRS BUTTON PANEL IS BROKEN. MECHANIC REPLACED TOP FLOOR HALL BUTTON. CHECKED AND RETURNED UNIT TO SERVICE.

DATE	DESCRIPTION	QTY	UOM	PRICE	AMOUNT
02/06/2020	SAN ANTONIO BRANCH Unit: 1 Serial #: US88917 Contract #: US32984 Gold - Full Maintenance, Customer pays full amount of Overtime - Elevator Labor Extra Work Outside Contract Daytime	.75	HR	\$371.29	\$278.47
AMOUNT		SALES TAX		PLEASE PAY THIS AMOUNT	
\$278.47		\$22.97		\$301.44	

This charge was created because service was not covered by maintenance contracts you may have with thyssenkrupp Elevator.
For Service Related or General Questions, please call 210-495-8585. For Billing or Payment Questions, please call 678-424-3636.

DETACH AND RETURN WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 02/13/2020
CUSTOMER #: 118594
SR #: 47923980
INVOICE #: 5001227572
PO #: WEB-238645
TERMS: 30 Days Net
TOTAL DUE: 301.44

Amount Enclosed: \$ _____

Payment Method	
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed <input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To: thyssenkrupp Elevator Corporation	

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 01/28/2020
CUSTOMER #: 118594
REPAIR #: 758845
INVOICE #: 6000421074
PO #: SIGNED WO
OPPORTUNITY ID: ACIA-1NSZY7A
TERMS: 30 Days Net
TOTAL DUE: 425.00

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

DESCRIPTION				AMOUNT
SAN ANTONIO BRANCH				
Ship To: GOLDS GYM LIVE OAK 7937 PAT BOOKER RD, LIVE OAK, TX Serial #: US88917 Unit: 1 Safety Test				\$425.00
AMOUNT	SALES TAX	SUBTOTAL	LESS DEPOSIT	PLEASE PAY THIS AMOUNT
\$425.00	\$0.00	\$425.00	\$0.00	\$425.00

For Service Related or General Questions, please call 210-495-8585. For Billing or Payment Questions, please call 678-424-3636.

RETURN THIS PORTION WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 01/28/2020
CUSTOMER #: 118594
REPAIR #: 758845
INVOICE #: 6000421074
PO #: SIGNED WO
OPPORTUNITY ID: ACIA-1NSZY7A
TERMS: 30 Days Net
TOTAL DUE: 425.00

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

Amount Enclosed: \$ _____

Payment Method		
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed	<input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To:		
thyssenkrupp Elevator Corporation		



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 01/28/2020
CUSTOMER #: 118594
REPAIR #: 758855
INVOICE #: 6000421068
PO #: PM-0133727
OPPORTUNITY ID: ACIA-1NT17W8
TERMS: 30 Days Net
TOTAL DUE: 425.00

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

DESCRIPTION				AMOUNT
SAN ANTONIO BRANCH				
Ship To: GOLDS GYM ALAMO QUARRY 255 E BASSE RD #400, SAN ANTONIO, TX Serial #: US190031 Unit: 1 Safety Test				\$425.00
AMOUNT	SALES TAX	SUBTOTAL	LESS DEPOSIT	PLEASE PAY THIS AMOUNT
\$425.00	\$0.00	\$425.00	\$0.00	\$425.00

For Service Related or General Questions, please call 210-495-8585. For Billing or Payment Questions, please call 678-424-3636.

RETURN THIS PORTION WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 01/28/2020
CUSTOMER #: 118594
REPAIR #: 758855
INVOICE #: 6000421068
PO #: PM-0133727
OPPORTUNITY ID: ACIA-1NT17W8
TERMS: 30 Days Net
TOTAL DUE: 425.00

REMIT PAYMENT TO:

Amount Enclosed: \$

Payment Method		
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed	<input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To: thyssenkrupp Elevator Corporation		

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 03/19/2020
CUSTOMER #: 118594
SR #: 48617744
INVOICE #: 5001245804
PO #: WEB-241803
TERMS: 30 Days Net
TOTAL DUE: 162.50

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

BILL TO:

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

GOLDS GYM #46008
3910 WILSON BLVD
ARLINGTON, VA 22203-1922

SHIP TO:

Reported By: NATHAN FISHGOLD, 703-516-4653 on 03/05/2020 13:32:01

Resolution Summary: CUSTOMER REQUESTED NEED DAMPER AND RELAY CHECKED. MECHANIC TROUBLESHOT AND FOUND PROBLEM WITH BUILDING FIRE SYSTEM.

DATE	DESCRIPTION	QTY	UOM	PRICE	AMOUNT
03/06/2020	NORTHERN VIRGINIA BRANCH Unit: ELEVATOR #1 Serial #: US250827 Contract #: US107646 Gold - Full Maintenance, Customer pays full amount of Overtime - Elevator Labor Callback Daytime	.5	HR	\$325.00	\$162.50
AMOUNT		SALES TAX		PLEASE PAY THIS AMOUNT	
\$162.50		\$0.00		\$162.50	

This charge was created because service was not covered by maintenance contracts you may have with thyssenkrupp Elevator.
For Service Related or General Questions, please call 571-642-0530. For Billing or Payment Questions, please call 770-261-0046.

DETACH AND RETURN WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 03/19/2020
CUSTOMER #: 118594
SR #: 48617744
INVOICE #: 5001245804
PO #: WEB-241803
TERMS: 30 Days Net
TOTAL DUE: 162.50

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

Amount Enclosed: \$

Payment Method
<input type="checkbox"/> Personal Check Enclosed <input type="checkbox"/> Money Order Enclosed <input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To: thyssenkrupp Elevator Corporation



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 03/18/2020
CUSTOMER #: 118594
REPAIR #: 768977
INVOICE #: 6000431538
PO #: 236028
OPPORTUNITY ID: ACIA-10IJ469
TERMS: 30 Days Net
TOTAL DUE: 1,917.63

TO VIEW AND PAY ONLINE GO TO: <https://thyssenkruppelevator.billtrust.com>
USE THIS ENROLLMENT TOKEN: PMM RKW PWV

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
3100 INTERSTATE NORTH CIR SE STE 600
ATLANTA GA 30339-2227

ITEM	DESCRIPTION	QTY	UOM	PRICE	AMOUNT
	WASHINGTON DC BRANCH				
	Ship To: GOLDS GYM VAN NESS 4310 CONNECTICUT AVE NW, WASHINGTON, DC				
	Serial #: US232273 Unit: 2 FASTADD				
L06002	Material/Subcontracting/Other	4	Hour	\$0.00	\$117.63
L06002	Labor Repair Scheduled Overtime	4	Hour	\$450.00	\$0.00
	Labor Repair Scheduled Overtime				\$1,800.00
AMOUNT		SALES TAX		SUBTOTAL	
\$1,917.63		\$0.00		\$1,917.63	
		LESS DEPOSIT		PLEASE PAY THIS AMOUNT	
		\$0.00		\$1,917.63	

For Service Related or General Questions, please call 301-345-6400. For Billing or Payment Questions, please call 770-261-0014.

RETURN THIS PORTION WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 03/18/2020
CUSTOMER #: 118594
REPAIR #: 768977
INVOICE #: 6000431538
PO #: 236028
OPPORTUNITY ID: ACIA-10IJ469
TERMS: 30 Days Net
TOTAL DUE: 1,917.63

REMIT PAYMENT TO:

Amount Enclosed: \$

Payment Method	
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed <input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To: thyssenkrupp Elevator Corporation	

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 01/9/2020
CUSTOMER #: 118594
SR #: 47018182
INVOICE #: 5001207251
PO #: WEB-234014
TERMS: 30 Days Net
TOTAL DUE: 2,707.25

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

BILL TO:

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

GOLDS GYM-ROCKVILLE
5520 RANDOLPH RD
ROCKVILLE, MD 20852-2629

SHIP TO:

Reported By: DAVID SOLINSKY, 301-230-6540 on 12/27/2019 16:11
Resolution Summary: CUSTOMER REPORTED UP ESCALATOR IS NOT RESPONDING- OVERTIME APPROVED. TECHNICIAN RESET BOTTOM RIGHT CHAIN TENSION SWITCH & CHECKED OPERATION.

DATE	DESCRIPTION	QTY	UOM	PRICE	AMOUNT
	WASHINGTON DC BRANCH Unit: ESC1 Serial #: US319009 Contract #: US137568 Gold - Full Maintenance, Customer pays full amount of Overtime - Escalator				
12/27/2019	Travel Overtime	0.5	HR	\$773.50	\$386.75
12/27/2019	Labor Callback Overtime	1.5	HR	\$773.50	\$1,160.25
12/27/2019	Travel Overtime	1.5	HR	\$773.50	\$1,160.25
AMOUNT		SALES TAX		PLEASE PAY THIS AMOUNT	
\$2,707.25		\$0.00		\$2,707.25	

This charge was created because service was not covered by maintenance contracts you may have with thyssenkrupp Elevator.
For Service Related or General Questions, please call 301-345-6400. For Billing or Payment Questions, please call 770-261-0029.

DETACH AND RETURN WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 01/9/2020
CUSTOMER #: 118594
SR #: 47018182
INVOICE #: 5001207251
PO #: WEB-234014
TERMS: 30 Days Net
TOTAL DUE: 2,707.25

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

Amount Enclosed: \$

Payment Method	
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed <input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To: thyssenkrupp Elevator Corporation	



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 12/18/2019
CUSTOMER #: 118594
SR #: 46655704
INVOICE #: 5001196406
PO #: WO# WEB-232868
TERMS: 30 Days Net
TOTAL DUE: 910.00

TO VIEW AND PAY ONLINE GO TO:	https://thyssenkruppelevator.billtrust.com
USE THIS ENROLLMENT TOKEN:	PMM RKW PWV

BILL TO:

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

GOLDS GYM-ROCKVILLE
5520 RANDOLPH RD
ROCKVILLE, MD 20852-2629

SHIP TO:

Reported By: MAELIS MITTIG, 717-799-0828 on 12/10/2019 16:55

Resolution Summary: CUSTOMER REPORTD DOWN ESCALATOR IS NOT WORKING. TECHNICIAN RESET COMB PLATE SWITCH, CHECKED OPERATION & RETURNED UNIT TO SERVICE.

DATE	DESCRIPTION	QTY	UOM	PRICE	AMOUNT
12/11/2019	WASHINGTON DC BRANCH Unit: ESC 2 Serial #: US319010 Contract #: US137568 Gold - Full Maintenance, Customer pays full amount of Overtime - Escalator Labor Extra Work Outside Contract Daytime	2	HR	\$455.00	\$910.00
AMOUNT		SALES TAX		PLEASE PAY THIS AMOUNT	
\$910.00		\$0.00		\$910.00	

This charge was created because service was not covered by maintenance contracts you may have with thyssenkrupp Elevator.
For Service Related or General Questions, please call 301-345-6400. For Billing or Payment Questions, please call 770-261-0029.

DETACH AND RETURN WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 12/18/2019
CUSTOMER #: 118594
SR #: 46655704
INVOICE #: 5001196406
PO #: WO# WEB-232868
TERMS: 30 Days Net
TOTAL DUE: 910.00

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

Amount Enclosed: \$ _____

Payment Method	
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed <input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To:	
thyssenkrupp Elevator Corporation	



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE

INVOICE DATE: 12/05/2019
CUSTOMER #: 118594
SR #: 46282898
INVOICE #: 5001190665
PO #: WEB-231240
TERMS: 30 Days Net
TOTAL DUE: 682.50

TO VIEW AND PAY ONLINE GO TO: <https://thyssenkruppelevator.billtrust.com>
USE THIS ENROLLMENT TOKEN: PMM RKW PWV

BILL TO:

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

GOLDS GYM-ROCKVILLE
5520 RANDOLPH RD
ROCKVILLE, MD 20852-2629

SHIP TO:

Reported By: GUILLERMO ROJAS, 301-230-6540 on 11/22/2019 07:24:25

Resolution Summary: CUSTOMER REPORTED ESCALATOR IS NOT WORKING. TECHNICIAN FOUND IMPACT COMB PLATE SWITCHES TRIPPED- RESET UNIT, CHECKED OPERATION & RETURNED TO SERVICE.

DATE	DESCRIPTION	QTY	UOM	PRICE	AMOUNT
11/22/2019	WASHINGTON DC BRANCH Unit: ESC 2 Serial #: US319010 Contract #: US137568 Gold - Full Maintenance, Customer pays full amount of Overtime - Escalator Labor Extra Work Outside Contract Daytime	1.5	HR	\$455.00	\$682.50
AMOUNT		SALES TAX		PLEASE PAY THIS AMOUNT	
\$682.50		\$0.00		\$682.50	

This charge was created because service was not covered by maintenance contracts you may have with thyssenkrupp Elevator.
For Service Related or General Questions, please call 301-345-6400. For Billing or Payment Questions, please call 770-261-0029.

DETACH AND RETURN WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
3100 Interstate North Cir SE Ste 500
Atlanta, GA 30339-2227

INVOICE DATE: 12/05/2019
CUSTOMER #: 118594
SR #: 46282898
INVOICE #: 5001190665
PO #: WEB-231240
TERMS: 30 Days Net
TOTAL DUE: 682.50

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

Amount Enclosed: \$

Payment Method	
<input type="checkbox"/> Personal Check Enclosed	<input type="checkbox"/> Money Order Enclosed <input type="checkbox"/> Cashiers Check Enclosed
Please Make Check Payment To: thyssenkrupp Elevator Corporation	



thyssenkrupp Elevator Corporation
Attn: Accounts Receivable Dept.
7481 N.W. 66TH STREET
Miami, FL 33166-2801

INVOICE

INVOICE DATE: 10/31/2019
CUSTOMER #: 118594
SR #: 45512946
INVOICE #: 5001173552
PO #: WO# WEB-227623
TERMS: 30 Days Net
TOTAL DUE: 682.50

TO VIEW AND PAY ONLINE GO TO: <https://thyssenkruppelevator.billtrust.com>
USE THIS ENROLLMENT TOKEN: PMM RKW PWV

BILL TO:

ATTN: ACCOUNTS PAYABLE
NTL-GOLDS GYM INTERNATIONAL
3100 INTERSTATE NORTH CIR SE STE 600
GOLDSGYMREPAIRS@THYSSENKRUPP.COM
ATLANTA, GA 30339-2227

GOLDS GYM-ROCKVILLE
5520 RANDOLPH RD
ROCKVILLE, MD 20852-2629

SHIP TO:

Reported By: GUILLERMO ROJAS, 301-230-6540 on 10/18/2019 12:22:34

Resolution Summary: CUSTOMER REPORTED DOWN ESCALATOR IS NOT RESPONDING. TECHNICIAN FOUND COMB IMPACT SWITCH TRIPPED- RESET & TESTED OPERATION.

DATE	DESCRIPTION	QTY	UOM	PRICE	AMOUNT
10/21/2019	WASHINGTON DC BRANCH Unit: ESC 2 Serial #: US319010 Contract #: US137568 Gold - Full Maintenance, Customer pays full amount of Overtime - Escalator Labor Extra Work Outside Contract Daytime	1.5	HR	\$455.00	\$682.50
AMOUNT		SALES TAX		PLEASE PAY THIS AMOUNT	
\$682.50		\$0.00		\$682.50	

This charge was created because service was not covered by maintenance contracts you may have with thyssenkrupp Elevator.
For Service Related or General Questions, please call 301-345-6400. For Billing or Payment Questions, please call 770-261-0029.

DETACH AND RETURN WITH YOUR PAYMENT



thyssenkrupp Elevator Corporation
Attn: Accounts Receivable Dept.
7481 N.W. 66TH STREET
Miami, FL 33166-2801

INVOICE DATE: 10/31/2019
CUSTOMER #: 118594
SR #: 45512946
INVOICE #: 5001173552
PO #: WO# WEB-227623
TERMS: 30 Days Net
TOTAL DUE: 682.50

REMIT PAYMENT TO:

thyssenkrupp Elevator Corporation
PO BOX 3796
CAROL STREAM, IL 60132-3796

Amount Enclosed: \$

Payment Method

☐ Personal Check Enclosed ☐ Money Order Enclosed ☐ Cashiers Check Enclosed

Please Make Check Payment To:

thyssenkrupp Elevator Corporation