## Installment Schedule Michigan Municipal League Workers' Compensation Fund

Consumer Village Of Lake Orion

Plan 4 Pay Plan

Contract 5001710-24

Provider Meadowbrook, Inc.

**Eff Date** 07/01/2024 00:0' **Exp Date** 07/01/2025 00:0'

Program Michigan Municipal League Workers' Compensation Fund

**Coverage** Workers Compensation

	Inst Num	Invoice Num	Tran Date	Due Date	Installment Amount	Total Due
Renewal	0	3038207	7/2024 00:00:00	1/2024 00:00:00		\$14,947.00
Down Payment	1	3039207	1/2024 00:00:00	5/2024 00:00:00	\$3,737.00	
Installment	2	3040207	1/2024 00:00:00	5/2024 00:00:00	\$3,737.00	
Installment	3	3041207	1/2025 00:00:00	5/2024 00:00:00	\$3,737.00	
Installment	4	3042207	1/2025 00:00:00	5/2025 00:00:00	\$3,736.00	
				-	\$14,947.00	\$14,947.00