

**CWT—CULLIGAN OF WHEATON**

120 Bridge Street  
Wheaton, IL 60187

(630) 668-4100 cwt@culliganwheaton.com



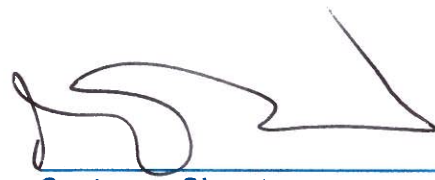
4/7/2016

Wheaton Park District  
Contact: Sherry Krajelis  
855 W. Prairie Ave.,  
Wheaton, Illinois 60187

Attached is a copy of the original bottled water contract executed on 5/2/14. Please sign below, agreeing to extend the terms of the contract for an additional 24 months (5/2/16-5/2/18). The terms and conditions will remain the same as the original contract.



Dealer Representative



Customer Signature 4/17/16

Improving Water in DuPage Co. Since 1938™

Phone: 630-668-4100 Fax: 630-653-6705 Email: [cwt@culliganwheaton.com](mailto:cwt@culliganwheaton.com)



5 12 14

## EQUIPMENT LOCATION:

Name Wharton Part Dist.

Add.

City \_\_\_\_\_ Zip \_\_\_\_\_ Ph. \_\_\_\_\_

Contact Sherry Kraeulis Email \_\_\_\_\_

### Directions

**BILL TO:**

Name Whetson Park District

Add. 855 W. Prairie Ave. City Wheaton

State IL Zip 60187 Ph. 510-5051

trajelis@wheatonparks.org

**MAP CODE:**

## CULLIGAN EQUIPMENT PURCHASE

Qty.	Model Description	Serv. Code	Equip. Code	Price
Salt			lbs.	
Tax				
Add'l. Charges				
Total Cash Price				
Less: Payment with order		<input type="checkbox"/> cash	<input type="checkbox"/> check	<input type="checkbox"/> credit card
Credit Card Authorization #				
Total Balance Due				
<input type="checkbox"/> TOTAL BALANCE DUE when equipment is installed.				
<input type="checkbox"/> TOTAL BALANCE DUE to be paid in ____ monthly installments of \$_____ each, beginning 30 days after installation with a final payment of \$_____ on _____.				
CASH		FINANCE		<input type="checkbox"/>
CONVERSION		OPTION		<input type="checkbox"/>

**T.O.:**

## CULLIGAN EQUIPMENT LEASE

Qty.	Model Description	Serv. Code	Equip. Code	Mo. Rate
9	CAC	431	502	6 00
	VIP water at			
	\$5.90 per gal.			
	Bottle			
Initial Charges Paid by Lessee				Amount
Basic Installation Charge				
Salt	lbs.	Bottles		
Tax				
Add'l. Charges/Deposits				
Total Initial Charges				
Less: Payment with order <input type="checkbox"/> cash <input type="checkbox"/> check <input type="checkbox"/> credit card				
Credit Card Authorization #				
Total Charges				
LEASE OPTION: Lessee shall have the option to purchase the leased equipment at any time within the lease period for \$ _____.				
(Less the monies paid for the basic installation charge and lease charges for the first six months.)				

The following terms and conditions including those on the reverse side apply to Culligan Equipment Purchase and/or Culligan Equipment Lease .....**PLEASE READ!**

YOU THE BUYER MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION. TO CANCEL THIS TRANSACTION, MAIL OR DELIVER A WRITTEN NOTICE OF CANCELLATION TO:

Culligan DuPage Soft Water Service, Incorporated  
120 Bridge Street - Wheaton, IL 60187

CULLIGAN EQUIPMENT LEASE ONLY:

1. Term of lease 12 months ☐ 24 months ☒
2. Total amount of periodic payments \$ 1,296.00
3. Title to leased equipment: All Culligan lease equipment furnished shall remain the exclusive property of the lessor, CULLIGAN DUPAGE SOFT WATER SERVICE, INCORPORATED.

This contract is subject to Dealer approval.

Frank Panzer  
DEALER REPRESENTATIVE

Customer:  
Tax Exempt # \_\_\_\_\_ Social Sec. # \_\_\_\_\_

Employed by ☐ or Business if self employed ☐

Address \_\_\_\_\_ C\_\_\_\_\_

Rent ☐ Own ☐ Personal Bank ☐

I have read the matter printed on the face of this contract and on the back hereof and agree to it as a part of this contract the same as if it were printed above my signature.

CUSTOMER SIGNATURE

**CUSTOMER SIGNATURE**

Bus. Phone \_\_\_\_\_

City Phone

Acct. No. 262006

Contract No. 77630.40