

Jacksonville Village Electric Utility
Rate Case Study
MVP Health Care

JEC-Jurczyk-12C

Test Year: 12 months ending December 31, 2025
Rate Year: July 5, 2026 - July 4, 2027
Filed: 21-May-26



Contact: Amanda Pike
Village of Jacksonville
351 VT RT 112
PO BOX 169
Jacksonville, VT 05342

Invoice ID 000000022743433
Invoice Date March 8, 2026
Coverage Period From 04/01/2026
Through 04/30/2026
Due Date 03/31/2026

Group ID 431875 Subgroup ID 0001

Account Summary			
02/08/2026	Previous Balance Due:		\$3,017.21
02/27/2026	Payment	260580000000183 C7FF22	\$-3,017.21
	Outstanding Balance as of 03/08		\$0.00
	Current Invoice		\$3,017.21
	TOTAL DUE:		\$3,017.21

Name: Village of Jacksonville
Group ID: 431875
Subgroup ID: 0001

Coverage Period: 04/01/2026 - 04/30/2026
Date Due: 03/31/2026
Amount Due: \$3,017.21
Amount Paid: \$

Please Make Checks Payable To:

MVP Health Care, Inc.
PO Box 22863
New York, NY 10087-2863

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