

2

Account Number: 99-99-999-99			
Due Date:	10/28/2019	Net Amount	104.38
Bill Date:	10/10/2019	Gross Due After Due Date	108.27

Page 1 of 2

OCTOBER IS NATIONAL CO-OP MONTH! MLEC IS PROUD TO SERVE OUR MEMBERS AND COMMUNITIES.  
 WANT TO CHECK YOUR HOME TEMPERATURE WHILE YOU ARE AWAY? PURCHASE A WI-FI THERMOSTAT WITH INSTANT REBATES AT ENERGYWISEMNSTORE.COM  
 IN OCTOBER, WE WILL BE WORKING WITH NATIONAL RURAL ELECTRIC COOPERATIVE (NRECA) TO COMPLETE A MEMBER SATISFACTION SURVEY. IF YOU ARE CONTACTED, WE WOULD APPRECIATE A FEW MINUTES OF YOUR TIME TO SHARE YOUR OPINIONS. THANK YOU!

5

1

Pay By Phone: 855-385-9813  
 Online Payments: www.mlecmn.net  
 Billing Team: 218-429-0430 or 877-634-4314  
 Main Office: 218-927-2191 or 800-450-2191  
 email: mlec@mlcmmn.net

MEMBER NAME  
 STREET ADDRESS  
 CITY STATE ZIP



Rate	Meter Number	Beginning Meter Reading			Ending Meter Reading			Meter Mult.	kWh/kW Used	kWh/kW Charges	Totals
		Date	Reading	Type	Date	Reading	Type				

SERVICE ADDRESS:123 ANY STREET

ELECTRIC PREVIOUS BALANCE											141.10
PAYMENT	09/19/19										-141.10
10 99999	RESIDENTIAL MAIN METER										
	08/31/19	40348	ACTUAL	10/01/19	40977	ACTUAL	1	629 @	.1032		64.91
ACCESS CHARGE											33.00
POWER COST ADJUSTMENT									.0010		0.63
WHOLESALE POWER COST ADJUSTMENT											-1.33
SALES TAX											6.68
CROW WING COUNTY TAX											0.49
ELECTRIC BALANCE DUE											104.38

3

4

Only services with a balance due are included in the net amount.

Return Bottom Portion With Your Payment

Check box  (indicate change of address or phone # on back)

6

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Due Date	10/28/2019
Net Amount	104.38
Gross Due After Due Date	108.27

MEMBER NAME  
 STREET ADDRESS  
 CITY STATE ZIP

MILLE LACS ENERGY COOPERATIVE  
 P.O. BOX 811  
 ALBERT LEA MN 56007-0811





Office Hours: Monday - Friday 8:00 AM - 4:30 PM  
 Billing Team: 218-429-0430 or 877-634-4314  
 Main Office: 218-927-2191 or 800-450-2191

*It is the mission of Mille Lacs Energy Cooperative to enhance the quality of life for people of our communities and surrounding areas by consistently providing reliable, affordable electric service and other value added services while holding our employees, our communities and our environment in high regard.*

**Bill Payments:**

- Must be received (not postmarked) by the due date.
- With our Direct Payment Plan, the amount due is automatically deducted from your bank account on the due date.
- Payments can be dropped in our Aitkin office night deposit 24/7.
- We also offer online payment at [www.mlecmn.net](http://www.mlecmn.net).

**Billing Terms:**

**Access Charge** is designed to have all members pay their fair share of fixed costs which include the costs of the backbone electric system - maintenance and depreciation of the lines, substations and transformers, along with bill preparation, meter reading, customer service functions, right-of-way maintenance and interest expense. Those costs exist to provide access to electricity whether or not you use any energy.

**kWh charge** is designed to cover the cost of wholesale power and the delivery costs to get the kilowatt-hours to your meter.

**Power Cost Adjustment** is the difference between MLEC's actual cost per kilowatt-hour (kWh) sold and the wholesale power cost used at the time our rates were established. When our actual cost of power is higher, you receive a charge; and when our actual cost of power is lower, you receive a credit.

**Wholesale Power Cost Adjustment** is the power cost adjustment MLEC receives on our wholesale power bill. We pass these charges or credits directly on to you based on your energy consumption.

**To Report Outages:**

Check your fuses or circuit breakers first.

**Call 927-2191 or 800-450-2191 for 24-hour service on power interruptions.** Your account number (shown on the front of this statement) and your phone number will help us locate your outage as rapidly as possible.

**Gopher State One-Call:**

Dial 811 or go to [www.gopherstateonecall.org](http://www.gopherstateonecall.org) to arrange for marking of utility-owned underground facilities.

***New Address Information***

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone: \_\_\_\_\_