




# PURCHASING DEPARTMENT

Madison County Board of Supervisors  
146 West Center Street / Post Office Box 608  
Canton, MS 39046  
Office (601)-855-5534 ~ Fax (601) 859-5875

June 17, 2024

To: Board of Supervisors

From: Kesha Jackson, Purchasing Clerk 

Subject June 2024 Travel Card Reconciliation Report

Per Department of Finance and Administration regulations, please accept this report into your minutes and authorize payment of the same.

## TRAVEL CARD RECONCILIATION

STATEMENT CLOSING DATE: 6/1/2024

<u>DEPARTMENT TRAVEL CARDS</u>	<u>CARD USER</u>	<u>PURPOSE</u>	<u>USE DATE</u>	<u>VENDOR NAME</u>	<u>AMOUNT</u>	<u>DESCRIPTION</u>
BOS1 CARD	Loretta Phillips	airline	5/1/2024	American Airline	\$633.70	meeting
	Clara Griffin	airline	5/1/2024	American Airline	\$633.70	meeting
	Jennifer Knigt	lodging	5/4/2024	IP Casino Resort	(\$4.00)	meeting
	Abonie Robicheaux	lodging	5/4/2024	IP Casino Resort	(\$4.00)	meeting
	Nason White	lodging	5//8/2024	IP Casino Resort	\$111.99	meeting
	Nason White	lodging	5/8/2024	IP Casino Resort	\$232.98	meeting
	Loretta Phillips	lodging	5/21/2024	IP Casino Resort	\$89.59	meeting
	Clara Griffin	lodging	5/21/2024	IP Casino Resort	\$89.59	meeting
	Loretta Phillips	lodging	5/21/2024	IP Casino Resort	\$192.38	meeting
	Clara Griffin	lodging	5/21/2024	IP Casino Resort	\$192.38	meeting
<b>BOS1 CARD TOTAL</b>					<b>\$2,168.31</b>	
<b>BOS2 CARD</b>	<b>DISPUTE CHARGE</b>		5/8/2024	Hampton Inn	<b>\$161.83</b>	
			*See Attached Documents - DO NOT PAY*			
SO1 CARD	Jessica Olson	lodging	5/24/2024	Holiday Inn Express	\$764.95	meeting
	Justin McDonald	lodging	5/24/2024	Holiday Inn Express	\$764.95	meeting
	Charles Hopkins	lodging	5/24/2024	Holiday Inn Express	\$764.95	meeting
	Aarin Hancock	lodging	5/24/2024	Holiday Inn Express	\$764.95	meeting
<b>SO1 CARD TOTAL</b>				<b>\$3,059.80</b>		
SO2 CARD	Josh Fish	lodging	5/19/2024	Provident Doral Blue	\$170.85	meeting
	Joel Evans	lodging	5/19/2024	Provident Doral Blue	\$170.85	meeting
	Kristen Byrd	lodging	5/19/2024	Provident Doral Blue	\$170.85	meeting
	Randt Tucker	lodging	5/26/2024	Golden Nugget	\$410.94	meeting
<b>SO2 CARD TOTAL</b>				<b>\$923.49</b>		
<b>TOTAL TO PAY</b>					<b>\$6,151.60</b>	



### Summary of Account Activity

Previous Balance	\$8,779.75
Payments/Debits	-\$7,921.27
Other Credits	-\$8.00
Purchases	+\$6,321.43
Cash Advances	+\$0.00
<b>Fees Charged</b>	+\$0.00
<b>Interest Charged</b>	+\$0.00
<b>New Balance</b>	<b>= \$7,171.91</b>

### Payment Information

New Balance	\$7,171.91
Minimum Payment Due	\$7,171.91
Payment Due Date	06/28/24
Past Due Amount	\$850.48
Minimum Payment Due includes Past Due Amount and/or Overlimit Amount.	

Account Name	MADISON COUNTY BOS
Payment Reference Number	80000018751
Account Number	XXXX XXXX XXXX 7611
Page 1 of 4	

Credit Limit	\$50,000.00
Available Credit	\$42,828.09
Cash Advance Limit	\$3,500.00
Available for Cash Advance	\$3,500.00
Statement Closing Date	06/02/24
Days in Billing Cycle	32

**Payment Address:**  
 CARD SERVICES  
 PO BOX 875852  
 KANSAS CITY MO 64187-5852

**Contact Us:**  
 Lost/Stolen and  
 General Inquiries: ..... 888-494-5141  
 Alternate Number: ..... 816-843-2000

Telephoning about billing errors will not preserve your rights under federal law.

#### \*IMPORTANT - You've missed a payment\*

Your account is past due. Please submit a payment equal to or greater than the Minimum Amount Due immediately. Disregard this notice if a payment has already been made.

Electronic statements will simplify your life, help you become more organized and are good for the environment. Sign up for eStatements today! Visit [www.umb.com](http://www.umb.com) or use your mobile app, log in, click your credit card account tile, select **Settings** from the menu and then **Statement Preferences**. Set your preference to **Electronic Delivery**. We make up to 18 months of eStatements available to you at no cost. Your electronic **Account Statements** are accessible under the **Services** menu option.

#### Late Payment Warning:

If we do not receive your minimum payment by the Payment Due Date, you may have to pay a late fee up to \$39.00.

If you are experiencing financial difficulties due to a recent natural disaster, please contact us at 888.494.5141 to discuss payment options best suited to your needs. We are here to help.

### Corporate Transaction Information

Transaction Date	Posting Date	Reference Number	Description	Amount
05/24	05/24	41450002297754201210001	PAYMENT RECEIVED -- THANK YOU	-7,921.27



CARD CENTER  
 PO BOX 419734  
 KANSAS CITY MO 64141-6734

Please send address change requests to [commercial.bankcards@umb.com](mailto:commercial.bankcards@umb.com). If you have any questions please contact 888-494-5141.

MADISON COUNTY BOS  
 146 WEST CENTER ST  
 CANTON MS 39046

Account Number	XXXX XXXX XXXX 7611
New Balance	\$7,171.91
Payment Due Date	06/28/24
Past Due Amount	\$850.48
Minimum Payment	\$7,171.91
Amount Enclosed	

CARD SERVICES  
 PO BOX 875852  
 KANSAS CITY MO 64187-5852

800000187511 0000717191 0000717191 9465

Account Name: MADISON COUNTY BOS

Account Number: XXXX XXXX XXXX 7611

**Cardholder Transaction Information**

Transaction Date	Posting Date	Reference Number	Description	Amount
<b>MADISON CO SHERIFF 1 XXXX XXXX XXXX 9039 TOTAL: \$3,059.80</b>				
05/24	05/26	24943004146970788988112	HOLIDAY INN EXPRESS AND 6629963333 MS 3501: HOLIDAY INNS 000038671 CHECK IN/OUT: 05/19/2024	764.95
05/24	05/26	24943004146970789009801	HOLIDAY INN EXPRESS AND 6629963333 MS 3501: HOLIDAY INNS 000038671 CHECK IN/OUT: 05/19/2024	764.95
05/24	05/26	24943004146970789021665	HOLIDAY INN EXPRESS AND 6629963333 MS 3501: HOLIDAY INNS 000038671 CHECK IN/OUT: 05/19/2024	764.95
05/24	05/26	24943004146970789036069	HOLIDAY INN EXPRESS AND 6629963333 MS 3501: HOLIDAY INNS 000038671 CHECK IN/OUT: 05/19/2024	764.95
<b>MADISON CO SHERIFF 2 XXXX XXXX XXXX 9047 TOTAL: \$923.49</b>				
05/17	05/19	24906044139041600017165	PROVIDENT DORAL BLUE DORAL FL 7011: LODGING, HOTELS, MOTELS, RESORTS 000033178 CHECK IN/OUT: 05/16/2024	170.85
05/17	05/19	24906044139041600017074	PROVIDENT DORAL BLUE DORAL FL 7011: LODGING, HOTELS, MOTELS, RESORTS 000033178 CHECK IN/OUT: 05/16/2024	170.85
05/17	05/19	24906044139041600017199	PROVIDENT DORAL BLUE DORAL FL 7011: LODGING, HOTELS, MOTELS, RESORTS 000033178 CHECK IN/OUT: 05/16/2024	170.85
05/28	05/29	24943004149968451138038	GNBX - HOTEL 2284355400 MS 3561: GOLDEN NUGGET 000039530 CHECK IN/OUT: 06/03/2024	410.94
<b>MADISON COUNTY BOS XXXX XXXX XXXX 2740 TOTAL: \$2,168.31</b>				
05/01	05/02	24035964122634003259723	AMERICAN AIR0012137674775FORT WORTH TX 3001: AMERICAN AIRLINES 000076155 NAME: PHILLIPS/LORETTA TICKET #: 0012137674775 LEG 1: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: CLT ORIGINATION: JAN LEG 2: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: ORD ORIGINATION: CLT LEG 3: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: DFW ORIGINATION: ORD	633.70

Account Name: MADISON COUNTY BOS

Account Number: XXXX XXXX XXXX 7611

**Cardholder Transactions Continued**

Transaction Date	Posting Date	Reference Number	Description	Amount
05/01	05/02	24035964122634003135600	AMERICAN AIR0012137678577FORT WORTH TX 3001: AMERICAN AIRLINES 000076155 NAME: GRIFFIN/CLARA TICKET #: 0012137678577 LEG 1: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: CLT ORIGINATION: JAN LEG 2: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: ORD ORIGINATION: CLT LEG 3: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: DFW ORIGINATION: ORD	633.70
05/04	05/05	74943004125970447725657	IP CASINO RESORT SPA 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	-4.00
05/04	05/05	74943004125970447775892	IP CASINO RESORT SPA 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	-4.00
05/08	05/09	24943004129968102048259	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	111.99
05/08	05/09	24943004129968102090889	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539 CHECK IN/OUT: 06/10/2024	232.98
05/21	05/22	24943004142968287265978	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	89.59
05/21	05/22	24943004142968287270549	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539 CHECK IN/OUT: 09/08/2024	89.59
05/21	05/22	24943004142968287285729	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	192.38
05/21	05/22	24943004142968287289333	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539 CHECK IN/OUT: 09/08/2024	192.38
<b>MADISON COUNTY BOS XXXX XXXX XXXX 6061 TOTAL: \$161.83</b>				
05/08	05/08	24015143112036001250174	INT DSP/ HAMPTON INN 3665: HAMPTON INNS HOTELS 000078216	161.83

**Interest Charge Calculation**

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
PURCHASES	0.00%	\$6,321.43	\$0.00

(v) = Variable Rate

Account Name: MADISON COUNTY BOS

Account Number: XXXX XXXX XXXX 7611

**Do you need to dispute a transaction?**

If you believe that your statement is incorrect or would like additional information about a transaction on your statement, please contact us at 888-494-5141 for assistance. You must notify us within sixty (60) days from the transaction date to dispute any erroneous transactions.

**Commercial Card Services:**

888-494-5141

24/7/365

When you wish to dispute a Card transaction, you must provide us with the following information: (i) User ID (if applicable); (ii) Card account number; (iii) the dollar amount of any billing dispute or suspected error; (iv) reason that you believe the bill is incorrect; and (v) a summary of the steps that you may have already taken with the merchant in question to resolve the matter.

We will investigate the disputed amount and determine whether, in our view, the amount was properly billed to your account. Until we complete our investigation and determine whether the amount was properly billed, you will not be liable for the amount of the disputed transaction.

**Has a Card been lost, stolen or otherwise compromised?**

You must notify us at once if a Card is lost or stolen. You should also notify us if you think someone used one of your Cards without authorization. Please contact our Commercial Card Services team immediately if you believe a Card belonging to you is lost, stolen or has been compromised in any way.

**Commercial Card Services:**

888-494-5141

24/7/365



### Summary of Account Activity

Total Activity \$161.83

Credit Limit \$5,000.00

Cash Advance Limit \$1,250.00

Statement Closing Date 06/02/24

Days in Billing Cycle 32

**Not an invoice.  
For your records only.**

Cardholder Name  
MADISON COUNTY BOS

Account Number  
XXXX XXXX XXXX 6061

Page 1 of 4

**Contact Us:**

Lost/Stolen and  
 General Inquiries: .....888-494-5141  
 Alternate Number: .....816-843-2000

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### Transaction Information - Notice Memo Item(s) Listed Below

Transaction Date	Posting Date	Reference Number	Description	Amount
05/08	05/08	24015143112036001250174	INT DSP/ HAMPTON INN 3665: HAMPTON INNS HOTELS 000078216	161.83



CARD CENTER  
 PO BOX 419734  
 KANSAS CITY MO 64141-6734

Account Number XXXX XXXX XXXX 6061  
 New Balance \$161.83  
 Statement Date 06/02/24

MADISON COUNTY BOS  
 MADISON COUNTY BOS  
 MADISON COUNTY BOS  
 PO BOX 608  
 CANTON MS 39046-0608

\*\*\*N0013339

**Not an invoice.  
For your records only.**





Cardholder Name: MADISON COUNTY BOS

Account Number: XXXX XXXX XXXX 6061

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24/7/365

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### **Commercial Card Services:**

888-494-5141

24/7/365



MEMORANDUM FOR THE RECORD

DATE: 10/15/2010

TO: [Illegible]

FROM: [Illegible]

SUBJECT: [Illegible]

[Illegible text block]

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# VISA PURCHASING CARD DISPUTE FORM

## ACCOUNT INFORMATION

Madison County Board of Supervisors xxxx xxxx xxxx 6061  
 Name: Account Number:  
Madison County Board of Supervisors 601-855-5534  
 Company Name: Business Phone:

## TRANSACTION INFORMATION

INT DSP/Hampton Inn 161.83  
 Merchant Name: Amount of Dispute  
5/8/2024 24015143112036001250174  
 Date of Transaction: Reference Number of Transaction from Statement

## DISPUTE DETAILS

Please mark the appropriate dispute reason listed below and if indicated, provide the requested documentation.

- Need a copy of the transaction in order to submit payment.
- I do not recognize the above merchant. I am asking that the merchant provide me with more information to help identify whether or not the charge is valid. All valid cards issued to this account are in my possession.
- Although I did engage in the above transaction, I am disputing \$ \_\_\_\_\_ of the above charge. I have contacted the merchant and attempted to resolve the matter. I have provided the details below.
- Amount is to be billed to a different UMB card number. UMB card number: \_\_\_\_\_
- Incorrect Amount. *Must provide copy of receipt.* I was billed \$ \_\_\_\_\_ but should have been billed \$ \_\_\_\_\_
- Duplicate Posting. The original transaction posted to my statement for \$ \_\_\_\_\_ on \_\_\_\_\_ date.
- I returned the merchandise to the merchant on \_\_\_\_\_ date. The reason for return is listed below. *Must provide proof of return.*
- I have a credit slip and the credit has not posted to my account. *Must provide copy of credit slip.*
- To best of my knowledge I, nor anyone authorized by me, received the goods or services represented by the charge. I also certify that I, nor anyone with my permission, engaged with the above merchant in any manner.
- I have not received the merchandise and it was to be delivered on \_\_\_\_\_ date.  
*Must give dates when the merchant was contacted to check on the status of the order & their response below.*
- I cancelled a guaranteed late arrival hotel reservation on \_\_\_\_\_ date at \_\_\_\_\_ time & cancellation # is: \_\_\_\_\_
- Other. Details of the dispute have been provided below.

## ADDITIONAL INFORMATION REGARDING THE DISPUTED CHARGE

We (Madison County Board of Supervisors) did not make the fraudulent charge to our County's  
Travel card on the date of 5/8/2024. It does not show the city nor state this was charged in.  
This card has not been used since August 2023.  
Please see attached statement charge.

SEND THIS FORM TO:  
 UMB Bank Card Center  
 ATTN: PURCHASING CARD DISPUTES  
 P.O. BOX 419734  
 KANSAS CITY, MO 64141  
 FAX: 816-843-2485

Keshav Adhoni  
 Cardholder's Signature & Today's Date



### Summary of Account Activity

Total Activity \$3,059.80

Credit Limit \$10,000.00

Cash Advance Limit \$0.00

Statement Closing Date 06/02/24

Days in Billing Cycle 32

Cardholder Name  
MADISON CO SHERIFF 1

Account Number  
XXXX XXXX XXXX 9039

Page 1 of 4

**Not an invoice.  
For your records only.**

#### Contact Us:

Lost/Stolen and  
General Inquiries: .....888-494-5141  
Alternate Number: .....816-843-2000

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### Transaction Information - Notice Memo Item(s) Listed Below

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05/24	05/26	24943004146970788988112 3501: HOLIDAY INNS 000038671	HOLIDAY INN EXPRESS AND CHECK IN/OUT: 05/19/2024	764.95
05/24	05/26	24943004146970789009801 3501: HOLIDAY INNS 000038671	HOLIDAY INN EXPRESS AND CHECK IN/OUT: 05/19/2024	764.95
05/24	05/26	24943004146970789021665 3501: HOLIDAY INNS 000038671	HOLIDAY INN EXPRESS AND CHECK IN/OUT: 05/19/2024	764.95
05/24	05/26	24943004146970789036069 3501: HOLIDAY INNS 000038671	HOLIDAY INN EXPRESS AND CHECK IN/OUT: 05/19/2024	764.95



CARD CENTER  
PO BOX 419734  
KANSAS CITY MO 64141-6734

Account Number XXXX XXXX XXXX 9039  
New Balance \$3,059.80  
Statement Date 06/02/24

MADISON CO SHERIFF 1  
MADISON COUNTY BOS  
MADISON COUNTY BOS  
PO BOX 608  
CANTON MS 39046-0608

\*\*N0010605

**Not an invoice.  
For your records only.**





Cardholder Name: MADISON CO SHERIFF 1

Account Number: XXXX XXXX XXXX 9039

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888-494-5141

24/7/365

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### **Commercial Card Services:**

888-494-5141

24/7/365

**NAME: MCSO - card 1**

**CARD NUMBER: XXXX 9039**

**BILLING PERIOD: Mar-24**

<b>DATE</b>	<b>VENDOR</b>	<b>AMOUNT</b>	<b>USER</b>	<b>PRODUCT(S)</b>	<b>FUND</b>	<b>DEPT.</b>	<b>PURPOSE</b>	<b>RECEIPT</b>
5/24/2024	Holiday Inn Express	\$764.95	Jessica Olson	hotel	001	220	480	Y
5/24/2024	Holiday Inn Express	\$764.95	Justin McDonald	hotel	001	220	480	Y
5/24/2024	Holiday Inn Express	\$764.95	Charles Hopkins	hotel	001	220	480	Y
5/24/2024	Holiday Inn Express	\$764.95	Aarin Hancock	hotel	001	220	480	Y

**TOTAL \$3,059.80**



### Summary of Account Activity

Total Activity \$3,059.80

Credit Limit \$10,000.00

Cash Advance Limit \$0.00

Statement Closing Date 06/02/24

Days in Billing Cycle 32

**Not an invoice.  
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Cardholder Name  
MADISON CO SHERIFF 1

Account Number  
XXXX XXXX XXXX 9039

Page 1 of 4

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Alternate Number: .....816-843-2000

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05/24	05/26	24943004146970789009801 3501: HOLIDAY INNS 000038671	HOLIDAY INN EXPRESS AND 6629963333 MS CHECK IN/OUT: 05/19/2024	764.95
05/24	05/26	24943004146970789021665 3501: HOLIDAY INNS 000038671	HOLIDAY INN EXPRESS AND 6629963333 MS CHECK IN/OUT: 05/19/2024	764.95
05/24	05/26	24943004146970789036069 3501: HOLIDAY INNS 000038671	HOLIDAY INN EXPRESS AND 6629963333 MS CHECK IN/OUT: 05/19/2024	764.95

*Handwritten signature and date: 6-10-24*



CARD CENTER  
PO BOX 419734  
KANSAS CITY MO 64141-6734

Account Number XXXX XXXX XXXX 9039  
New Balance \$3,059.80  
Statement Date 06/02/24

MADISON CO SHERIFF 1  
MADISON COUNTY BOS  
MADISON COUNTY BOS  
PO BOX 608  
CANTON MS 39046-0608

\*\*\*ND010605

**Not an invoice.  
For your records only.**







05-24-24

<b>Jessica Olson</b> <b>Po Box 608</b> <b>Canton 39046</b> <b>United States</b>	Folio No. :		Room No. :	<b>227</b>
	A/R Number :		Arrival :	<b>05-19-24</b>
	Group Code :		Departure :	<b>05-24-24</b>
	Company :	<b>work</b>	Conf. No. :	<b>84592962</b>
	Membership No. :		Rate Code :	<b>IGCOR</b>
	Invoice No. :		Page No. :	<b>1 of 1</b>

Date	Description	Charges	Credits
05-19-24	*Accommodation	129.99	
05-20-24	*Accommodation	154.99	
05-21-24	*Accommodation	154.99	
05-22-24	*Accommodation	154.99	
05-23-24	*Accommodation	169.99	
05-24-24	Visa  XXXXXXXXXXXX9039		764.95
<b>Total</b>		<b>764.95</b>	<b>764.95</b>
<b>Balance</b>		<b>0.00</b>	

**Guest Signature:** \_\_\_\_\_

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Express & Suites Southaven  
 7237 Southcrest Parkway  
 Southaven, MS 38671  
 Telephone: (662) 996-3333 Fax: (662) 996-3334



05-24-24

<b>Jessica Olson</b> <b>Po Box 608</b> <b>Canton 39046</b> <b>United States</b>	Folio No. :		Room No. :	<b>225</b>
	A/R Number :		Arrival :	<b>05-19-24</b>
	Group Code :		Departure :	<b>05-24-24</b>
	Company :	<b>work</b>	Conf. No. :	<b>27647422</b>
	Membership No. :		Rate Code :	<b>IGCOR</b>
	Invoice No. :		Page No. :	<b>1 of 1</b>

Date	Description	Charges	Credits
05-19-24	*Accommodation	129.99	
05-20-24	*Accommodation	154.99	
05-21-24	*Accommodation	154.99	
05-22-24	*Accommodation	154.99	
05-23-24	*Accommodation	169.99	
05-24-24	Visa  XXXXXXXXXXXX9039		764.95
<b>Total</b>		<b>764.95</b>	<b>764.95</b>
<b>Balance</b>		<b>0.00</b>	

**Guest Signature:** \_\_\_\_\_

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

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 7237 Southcrest Parkway  
 Southaven, MS 38671  
 Telephone: (662) 996-3333 Fax: (662) 996-3334



05-24-24

<b>Jessica Olson</b> <b>Po Box 608</b> <b>Canton 39046</b> <b>United States</b>	Folio No. :	Room No. : <b>223</b>
	A/R Number :	Arrival : <b>05-19-24</b>
	Group Code :	Departure : <b>05-24-24</b>
	Company : <b>work</b>	Conf. No. : <b>49259917</b>
	Membership No. :	Rate Code : <b>IGCOR</b>
	Invoice No. :	Page No. : <b>1 of 1</b>

Date	Description	Charges	Credits
05-19-24	*Accommodation	129.99	
05-20-24	*Accommodation	154.99	
05-21-24	*Accommodation	154.99	
05-22-24	*Accommodation	154.99	
05-23-24	*Accommodation	169.99	
05-24-24	Visa  XXXXXXXXXXXX9039		764.95
<b>Total</b>		<b>764.95</b>	<b>764.95</b>
<b>Balance</b>		<b>0.00</b>	

**Guest Signature:** \_\_\_\_\_  
 I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Express & Suites Southaven  
 7237 Southcrest Parkway  
 Southaven, MS 38671  
 Telephone: (662) 996-3333 Fax: (662) 996-3334

Owned by Shiva Southaven, Inc. and operated by Southern Hospitality Services, LLC.



05-24-24

<b>Jessica Olson</b>	Folio No. :	Room No. : <b>221</b>
<b>Po Box 608</b>	A/R Number :	Arrival : <b>05-19-24</b>
<b>Canton 39046</b>	Group Code :	Departure : <b>05-24-24</b>
<b>United States</b>	Company : <b>work</b>	Conf. No. : <b>46202411</b>
	Membership No. :	Rate Code : <b>IGCOR</b>
	Invoice No. :	Page No. : <b>1 of 1</b>

Date	Description	Charges	Credits
05-19-24	*Accommodation	129.99	
05-20-24	*Accommodation	154.99	
05-21-24	*Accommodation	154.99	
05-22-24	*Accommodation	154.99	
05-23-24	*Accommodation	169.99	
05-24-24	Visa  XXXXXXXXXXXX9039		764.95
<b>Total</b>		<b>764.95</b>	<b>764.95</b>
<b>Balance</b>		<b>0.00</b>	

**Guest Signature:** \_\_\_\_\_  
 I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Express & Suites Southaven  
 7237 Southcrest Parkway  
 Southaven, MS 38671  
 Telephone: (662) 996-3333 Fax: (662) 996-3334



### Summary of Account Activity

Total Activity \$923.49

Credit Limit \$10,000.00

Cash Advance Limit \$0.00

Statement Closing Date 06/02/24

Days in Billing Cycle 32

Cardholder Name  
MADISON CO SHERIFF 2

**Not an invoice.  
For your records only.**

Account Number  
XXXX XXXX XXXX 9047

Page 1 of 4

#### Contact Us:

Lost/Stolen and  
General Inquiries: .....888-494-5141  
Alternate Number: .....816-843-2000

#### Late Payment Warning:

If we do not receive your minimum payment by the Payment Due Date, you may have to pay a late fee up to \$39.00.

If you are experiencing financial difficulties due to a recent natural disaster, please contact us at 888.494.5141 to discuss payment options best suited to your needs. We are here to help.

UMB will begin using text messaging to confirm suspicious transactions for credit cardholders with mobile phone numbers on record. Learn more about how UMB looks out for our customers by visiting [UMB.com/fraudalerts](http://UMB.com/fraudalerts).

### Transaction Information - Notice Memo Item(s) Listed Below

Transaction Date	Posting Date	Reference Number	Description	Amount
05/17	05/19	24906044139041600017165	PROVIDENT DORAL BLUE DORAL FL 7011: LODGING, HOTELS, MOTELS, RESORTS 000033178 CHECK IN/OUT: 05/16/2024	170.85
05/17	05/19	24906044139041600017074	PROVIDENT DORAL BLUE DORAL FL 7011: LODGING, HOTELS, MOTELS, RESORTS 000033178 CHECK IN/OUT: 05/16/2024	170.85
05/17	05/19	24906044139041600017199	PROVIDENT DORAL BLUE DORAL FL 7011: LODGING, HOTELS, MOTELS, RESORTS 000033178 CHECK IN/OUT: 05/16/2024	170.85
05/28	05/29	24943004149968451138038	GNBX - HOTEL 2284355400 MS 3561: GOLDEN NUGGET 000039530 CHECK IN/OUT: 06/03/2024	410.94



CARD CENTER  
PO BOX 419734  
KANSAS CITY MO 64141-6734

Account Number XXXX XXXX XXXX 9047  
New Balance \$923.49  
Statement Date 06/02/24

MADISON CO SHERIFF 2  
MADISON COUNTY BOS  
MADISON COUNTY BOS  
PO BOX 608  
CANTON MS 39046-0608

\*\*N0010606

**Not an invoice.  
For your records only.**





Cardholder Name: MADISON CO SHERIFF 2

Account Number: XXXX XXXX XXXX 9047

## Do you need to dispute a transaction?

If you believe that your statement is incorrect or would like additional information about a transaction on your statement, please contact us at 888-494-5141 for assistance. You must notify us within sixty (60) days from the transaction date to dispute any erroneous transactions.

### **Commercial Card Services:**

888-494-5141

24/7/365

When you wish to dispute a Card transaction, you must provide us with the following information: (i) User ID (if applicable); (ii) Card account number; (iii) the dollar amount of any billing dispute or suspected error; (iv) reason that you believe the bill is incorrect; and (v) a summary of the steps that you may have already taken with the merchant in question to resolve the matter.

We will investigate the disputed amount and determine whether, in our view, the amount was properly billed to your account. Until we complete our investigation and determine whether the amount was properly billed, you will not be liable for the amount of the disputed transaction.

## Has a Card been lost, stolen or otherwise compromised?

You must notify us at once if a Card is lost or stolen. You should also notify us if you think someone used one of your Cards without authorization. Please contact our Commercial Card Services team immediately if you believe a Card belonging to you is lost, stolen or has been compromised in any way.

### **Commercial Card Services:**

888-494-5141

24/7/365

**NAME: MCSO - card 2**

**CARD NUMBER: XXXX 9047**

**BILLING PERIOD: May-24**

<b>DATE</b>	<b>VENDOR</b>	<b>AMOUNT</b>	<b>USER</b>	<b>PRODUCT(S)</b>	<b>FUND</b>	<b>DEPT.</b>	<b>PURPOSE</b>	<b>RECEIPT</b>
5/19/2024	Provident Doral Blue	\$170.85	Josh Fish	hotel	001	220	480	Y
5/19/2024	Provident Doral Blue	\$170.85	Joel Evans	hotel	001	200	480	Y
5/19/2024	Provident Doral Blue	\$170.85	Kristen Byrd	hotel	001	200	480	Y
5/26/2024	Golden Nugget	\$410.94	Randy Tucker	hotel	001	200	480	Y

**TOTAL \$923.49**





Summary of Account Activity

Total Activity \$923.49

Credit Limit \$10,000.00

Cash Advance Limit \$0.00

Statement Closing Date 06/02/24

Days in Billing Cycle 32

Cardholder Name  
MADISON CO SHERIFF 2

**Not an invoice.  
For your records only.**

Account Number  
XXXX XXXX XXXX 9047

Page 1 of 4

Contact Us:

Lost/Stolen and  
General Inquiries: .....888-494-5141  
Alternate Number: .....816-843-2000

Late Payment Warning:

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Transaction Information - Notice Memo Item(s) Listed Below

Transaction Date	Posting Date	Reference Number	Description	Amount
05/17	05/19	24906044139041600017165	PROVIDENT DORAL BLUE DORAL FL 7011: LODGING, HOTELS, MOTELS, RESORTS 000033178 CHECK IN/OUT: 05/16/2024	170.85
05/17	05/19	24906044139041600017074	PROVIDENT DORAL BLUE DORAL FL 7011: LODGING, HOTELS, MOTELS, RESORTS 000033178 CHECK IN/OUT: 05/16/2024	170.85
05/17	05/19	24906044139041600017199	PROVIDENT DORAL BLUE DORAL FL 7011: LODGING, HOTELS, MOTELS, RESORTS 000033178 CHECK IN/OUT: 05/16/2024	170.85
05/28	05/29	24943004149968451138038	GNBX - HOTEL 2284355400 MS 3561: GOLDEN NUGGET 000039530 CHECK IN/OUT: 06/03/2024	410.94

*Printed 6-10-24*



CARD CENTER  
PO BOX 419734  
KANSAS CITY MO 64141-6734

Account Number XXXX XXXX XXXX 9047  
New Balance \$923.49  
Statement Date 06/02/24

MADISON CO SHERIFF 2  
MADISON COUNTY BOS  
MADISON COUNTY BOS  
PO BOX 608  
CANTON MS 39046-0608

\*\*\*00010606

**Not an invoice.  
For your records only.**



Josh Fish  
2941 highway 51  
Canton, MI 48187

  
PROVIDENT DORAL  
AT THE BLUE  
MIAMI  
5300 NW 87th Ave  
Doral, FL 33178  
305-597-8600

Reservation Number 2089Q0  
Number of Guests 1  
Room Number BKING  
Package DISST3 - Stay an  
Arrival 17-Jun-2024  
Departure 21-Jun-2024

					CHARGES	PAYMENTS
17-May-24	PMV	I	XXXX9047	TB	0.00	170.85
Totals for Sub-Folio: 1					0.00	170.85

(\* = Estimated Charge)

Estimated Reservation Balance

170.85 CREDIT

End of Folio for Reservation #: 2089Q0 - Fish, Josh

**Josh Fish**  
2941 highway 51  
Canton, MI 48187



Reservation Number 2089Q3	Number of Guests 1
Room Number BKING	Package DISST3 - Stay an
Arrival 17-Jun-2024	Departure 21-Jun-2024

					CHARGES	PAYMENTS
17-May-24	PMV	1	XXXX9047	TB	0.00	170.85
Totals for Sub-Folio: 1					0.00	170.85

(\* = Estimated Charge)

Estimated Reservation Balance

170.85 CREDIT

**End of Folio for Reservation #: 2089Q3 - Fish, Josh**

Josh Fish  
2941 highway 51  
  
Canton, MI 48187



Reservation Number 2089Q2	Number of Guests 1
Room Number BKING	Package DISS'T3 - Stay an
Arrival 17-Jun-2024	Departure 21-Jun-2024

					CHARGES	PAYMENTS
17-May-24	PMV	1	XXXX9047	TB	0.00	170.85
Totals for Sub-Folio: 1					0.00	170.85

(\* = Estimated Charge)

Estimated Reservation Balance

170.85 CREDIT

**End of Folio for Reservation #: 2089Q2 - Fish, Josh**

Name: RANDALL TUCKER  
 Address: 2941 HWY 51  
 CANTON MS 39046



Arrival Date: 06/03/2024 CI Clerk MMCCLENDON  
 Departure Date: 06/06/2024 CO Clerk BHARRISON  
 Group Code: S240306

Room #:	BX 1264	Resv	453574257109	Page	1 of 1
---------	---------	------	--------------	------	--------

Date	Reference	Description	Charges	Credits	Balance
06/03/2024	454455084307	APPLIED DEPOSIT *****9047		410.94	410.94-
06/03/2024	454459100068	ROOM REVENUE RESORT FEE	19.02		391.92-
06/03/2024	454459101112	ROOM CHARGE BX 1264	119.99		271.93-
06/04/2024	454469100080	ROOM REVENUE RESORT FEE	19.02		252.91-
06/04/2024	454469101109	ROOM CHARGE BX 1264	119.99		132.92-
06/05/2024	454479100078	ROOM REVENUE RESORT FEE	19.02		113.90-
06/05/2024	454479101159	ROOM CHARGE BX 1264	119.99		6.09
06/06/2024	454485112335	FRONT DESK VISA *****9047		6.09	
			<b>Total Due</b>		<b>.00</b>



### Summary of Account Activity

Total Activity \$2,168.31  
 Credit Limit \$20,000.00  
 Cash Advance Limit \$3,500.00  
 Statement Closing Date 06/02/24  
 Days in Billing Cycle 32

**Not an invoice.  
 For your records only.**

Cardholder Name  
 MADISON COUNTY BOS

Account Number  
 XXXX XXXX XXXX 2740

Page 1 of 4

#### Contact Us:

Lost/Stolen and  
 General Inquiries: .....888-494-5141  
 Alternate Number: .....816-843-2000

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### Transaction Information - Notice Memo Item(s) Listed Below

Transaction Date	Posting Date	Reference Number	Description	Amount
05/01	05/02	24035964122634003259723	AMERICAN AIR0012137674775FORT WORTH TX 3001: AMERICAN AIRLINES 000076155 NAME: PHILLIPS/LORETTA TICKET #: 0012137674775 LEG 1: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: CLT ORIGINATION: JAN LEG 2: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: ORD ORIGINATION: CLT LEG 3: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: DFW ORIGINATION: ORD	633.70
05/01	05/02	24035964122634003135600	AMERICAN AIR0012137678577FORT WORTH TX 3001: AMERICAN AIRLINES 000076155	633.70



CARD CENTER  
 PO BOX 419734  
 KANSAS CITY MO 64141-6734

Account Number XXXX XXXX XXXX 2740  
 New Balance \$2,168.31  
 Statement Date 06/02/24

MADISON COUNTY BOS  
 MADISON COUNTY BOS  
 MADISON COUNTY BOS  
 PO BOX 608  
 CANTON MS 39046-0608

\*\*\*N0010926

**Not an invoice.  
 For your records only.**





### Transaction Information - Notice Memo Item(s) Listed Below Continued

Transaction Date	Posting Date	Reference Number	Description	Amount
			NAME: GRIFFIN/CLARA TICKET #: 0012137678577 LEG 1: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: CLT ORIGINATION: JAN LEG 2: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: ORD ORIGINATION: CLT LEG 3: FLIGHT #: DATE: 06/22/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: DFW ORIGINATION: ORD	
05/04	05/05	74943004125970447725657	IP CASINO RESORT SPA 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	-4.00
05/04	05/05	74943004125970447775892	IP CASINO RESORT SPA 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	-4.00
05/08	05/09	24943004129968102048259	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	111.99
			CHECK IN/OUT: 06/10/2024	
05/08	05/09	24943004129968102090889	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	232.98
			CHECK IN/OUT: 06/10/2024	
05/21	05/22	24943004142968287265978	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	89.59
			CHECK IN/OUT: 09/08/2024	
05/21	05/22	24943004142968287270549	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	89.59
			CHECK IN/OUT: 09/08/2024	
05/21	05/22	24943004142968287285729	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	192.38
			CHECK IN/OUT: 09/08/2024	
05/21	05/22	24943004142968287289333	IP-MS ADV DEPOSIT 6014364555 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039539	192.38
			CHECK IN/OUT: 09/08/2024	

80381540 - 010926 - 0001 - 0002 -

## **Do you need to dispute a transaction?**

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### **Commercial Card Services:**

888-494-5141

24/7/365

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### **Commercial Card Services:**

888-494-5141

24/7/365





**Kesha Jackson**

---

**From:** American Airlines <no-reply@info.email.aa.com>  
**Sent:** Wednesday, May 1, 2024 3:23 PM  
**To:** Kesha Jackson  
**Subject:** Your trip confirmation (JAN - ORD)

**CAUTION!** External Content. Please use caution when opening attachments and links. Do not provide your username and password if requested.

American 

Issued: May 1, 2024

# Your trip confirmation and receipt

We charged \$633.70 to your card ending in 2740 for your ticket purchase.

You can check in via the American app 24 hours before your flight and get your mobile boarding pass.

Confirmation code: ~~XXXXXXXXXX~~

**Saturday, June 22, 2024**



**JAN**

Jackson  
10:47 AM

AA 5927

Operated by Piedmont Airlines  
as American Eagle




**CLT**

Charlotte  
1:49 PM

Seat: 9C  
Class: Economy (L)  
Meals:

## Your purchase

Loretta Phillips - AAdvantage® #: J56\*\*\*\*

~~New purchase 0013376773~~  \$633.70  
[\$545.12 + Taxes & carrier-imposed fees \$88.58]

---

**Total cost** \$633.70

## Your payment

Visa (ending 2740) \$633.70

---

**Total paid** \$633.70 

## Bag information

### Checked Bag (Airport)

JAN - ORD  
1<sup>st</sup> bag No charge  
2<sup>nd</sup> bag \$45.00  
JAN - ORD

### Checked Bag (Online\*)

JAN - ORD  
1<sup>st</sup> bag No charge  
2<sup>nd</sup> bag \$45.00

Maximum dimensions: 62 inches or 158 centimeters calculated as (length + width + height)  
Maximum weight: 50 pounds or 23 kilograms

For information regarding American Airlines checked baggage policies, please visit: Bag and optional fees

Bag fees apply at each Check-in location. Additional allowances and/or discounts may apply.  
Bag and optional fees

If your flight is operated by a partner airline, see the other airline's website for carry-on and checked bag policies.

\*Online payment available beginning 24 hours (and up to 4 hours) before departure.

### Carry-on bags (American Airlines)


**1<sup>st</sup> carry-on** Includes purse, briefcase, laptop bag, or similar item that must fit under the seat in front of you.

**Kesha Jackson**

---

**From:** American Airlines <no-reply@info.email.aa.com>  
**Sent:** Wednesday, May 1, 2024 3:30 PM  
**To:** Kesha Jackson  
**Subject:** Your trip confirmation (JAN - ORD)

**CAUTION!** External Content. Please use caution when opening attachments and links. Do not provide your username and password if requested.


American 

Issued: May 1, 2024

## Your trip confirmation and receipt

We charged \$633.70 to your card ending in 2740 for your ticket purchase.

You can check in via the American app 24 hours before your flight and get your mobile boarding pass.

Confirmation code 

**Saturday, June 22, 2024**



**JAN**

Jackson  
10:47 AM

**AA 5927**

Operated by Piedmont Airlines  
as American Eagle



**CLT**

Charlotte  
1:49 PM

Seat: 10C  
Class: Economy (L)  
Meals:

## Your purchase

**Clara Griffin**

Join the AAdvantage® Program

~~XXXXXXXXXXXXXXXXXXXX~~  
[~~XXXXXXXXXXXXXXXXXXXX~~  
\$545.12 + Taxes & carrier-imposed fees \$88.58]

\$633.70

---

**Total cost**

**\$633.70**

## Your payment

Visa (ending 2740)

\$633.70

---

**Total paid**

**\$633.70**

## Bag information

### Checked Bag (Airport)

JAN - ORD  
1<sup>st</sup> bag            \$40.00  
2<sup>nd</sup> bag            \$45.00  
JAN - ORD

### Checked Bag (Online\*)

JAN - ORD  
1<sup>st</sup> bag            \$35.00  
2<sup>nd</sup> bag            \$45.00

Maximum dimensions: 62 inches or 158 centimeters calculated as (length + width + height)  
Maximum weight: 50 pounds or 23 kilograms

For information regarding American Airlines checked baggage policies, please visit: Bag and optional fees

Bag fees apply at each Check-in location. Additional allowances and/or discounts may apply. Bag and optional fees

If your flight is operated by a partner airline, see the other airline's website for carry-on and checked bag policies.

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### Carry-on bags (American Airlines)

**1<sup>st</sup> carry-on**      Includes purse, briefcase, laptop bag, or similar item that must fit under the seat in front of you.

**Kesha Jackson**

---

**From:** IP Casino Resort Spa <donotreply@boydgamingmail.com>  
**Sent:** Tuesday, June 11, 2024 10:44 AM  
**To:** Kesha Jackson  
**Subject:** IP Casino Resort Spa Folio

**CAUTION!** *External Content. Please use caution when opening attachments and links. Do not provide your username and password if requested.*



Dear JENNIFER KNIGHT,

Thank you for staying with us. We hope you took advantage of all the IP Biloxi has to offer.

We invite you to stay with us again.

Can't wait to see you during your next visit to with us.

Sincerely,  
IP Casino Resort Spa

Date	Ref	Description	Charge	Credit	Balance
04/29/2024	454102528251	APPLIED DEPOSIT *****2740		-89.59	
04/29/2024	454102528253	APPLIED DEPOSIT *****2740		-290.37	

04/29/2024	454109100034	RESORT FEE	14.98	
		\$14 RESORT FEE + TAX		
04/29/2024	454109100035	RESORT FEE	14.00	
		\$14 RESORT FEE **NO TAX**		
04/29/2024	454109100036	RESORT FEE		-14.98
		REVERSAL OF \$14+TX RESORT		
04/29/2024	454109100463	ROOM CHARGE IP 1128	79.99	
		Calendar PIPD24C		
04/30/2024	454119100052	RESORT FEE	14.98	
		\$14 RESORT FEE + TAX		
04/30/2024	454119100053	RESORT FEE	14.00	
		\$14 RESORT FEE **NO TAX**		
04/30/2024	454119100054	RESORT FEE		-14.98
		REVERSAL OF \$14+TX RESORT		
04/30/2024	454119100899	ROOM CHARGE IP 1128	79.99	
		Calendar PIPD24C		
05/01/2024	454129100056	RESORT FEE	14.98	
		\$14 RESORT FEE + TAX		
05/01/2024	454129100057	RESORT FEE	14.00	
		\$14 RESORT FEE **NO TAX**		
05/01/2024	454129100058	RESORT FEE		-14.98
		REVERSAL OF \$14+TX RESORT		
05/01/2024	454129100886	ROOM CHARGE IP 1128	79.99	
		Calendar PIPD24C		
05/02/2024	454139100069	RESORT FEE	14.98	
		\$14 RESORT FEE + TAX		
05/02/2024	454139100070	RESORT FEE	14.00	
		\$14 RESORT FEE **NO TAX**		
05/02/2024	454139100071	RESORT FEE		-14.98
		REVERSAL OF \$14+TX RESORT		
05/02/2024	454139100862	ROOM CHARGE IP 1128	79.99	
		Calendar PIPD24C		
05/03/2024	454142702583	FRONT DESK VISA	-4.00	
		*****2740		
		SUMMARY OF CHARGES		
		ROOM	375.96	
		BALANCE DUE		



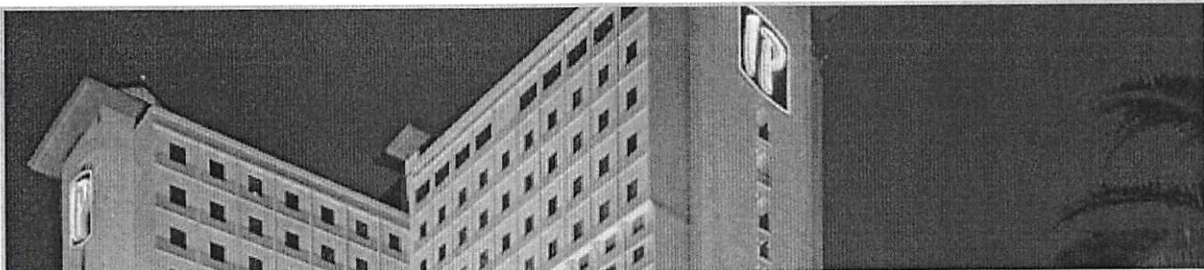
**IP Casino Resort Spa - Biloxi**  
 850 Bayview Avenue • Biloxi, MS 39530  
[ipbiloxi.com](http://ipbiloxi.com)  
 1-888-946-2847

**Kesha Jackson**

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**From:** IP Casino Resort Spa <donotreply@boydgamingmail.com>  
**Sent:** Tuesday, June 11, 2024 10:45 AM  
**To:** Kesha Jackson  
**Subject:** IP Casino Resort Spa Folio

***CAUTION! External Content. Please use caution when opening attachments and links. Do not provide your username and password if requested.***



Dear **ABONIE ROBICHEAUX**,

Thank you for staying with us. We hope you took advantage of all the IP Biloxi has to offer.

We invite you to stay with us again.

Can't wait to see you during your next visit to with us.

Sincerely,  
IP Casino Resort Spa

Date	Ref	Description	Charge	Credit	Balance
04/29/2024	454102521774	APPLIED DEPOSIT		-89.59	
		*****2740			
04/29/2024	454102521776	APPLIED DEPOSIT		-290.37	
		*****2740			



04/29/2024	454109100031	RESORT FEE	14.98	
		\$14 RESORT FEE + TAX		
04/29/2024	454109100032	RESORT FEE	14.00	
		\$14 RESORT FEE **NO TAX**		
04/29/2024	454109100033	RESORT FEE		-14.98
		REVERSAL OF \$14+TX RESORT		
04/29/2024	454109100455	ROOM CHARGE IP 1110	79.99	
		Calendar PIPD24C		
04/30/2024	454119100049	RESORT FEE	14.98	
		\$14 RESORT FEE + TAX		
04/30/2024	454119100050	RESORT FEE	14.00	
		\$14 RESORT FEE **NO TAX**		
04/30/2024	454119100051	RESORT FEE		-14.98
		REVERSAL OF \$14+TX RESORT		
04/30/2024	454119100885	ROOM CHARGE IP 1110	79.99	
		Calendar PIPD24C		
05/01/2024	454129100053	RESORT FEE	14.98	
		\$14 RESORT FEE + TAX		
05/01/2024	454129100054	RESORT FEE	14.00	
		\$14 RESORT FEE **NO TAX**		
05/01/2024	454129100055	RESORT FEE		-14.98
		REVERSAL OF \$14+TX RESORT		
05/01/2024	454129100870	ROOM CHARGE IP 1110	79.99	
		Calendar PIPD24C		
05/02/2024	454139100066	RESORT FEE	14.98	
		\$14 RESORT FEE + TAX		
05/02/2024	454139100067	RESORT FEE	14.00	
		\$14 RESORT FEE **NO TAX**		
05/02/2024	454139100068	RESORT FEE		-14.98
		REVERSAL OF \$14+TX RESORT		
05/02/2024	454139100846	ROOM CHARGE IP 1110	79.99	
		Calendar PIPD24C		
05/03/2024	454142703185	FRONT DESK VISA	-4.00	
		*****2740		
		SUMMARY OF CHARGES		
		ROOM	375.96	
		BALANCE DUE		



**IP Casino Resort Spa - Biloxi**  
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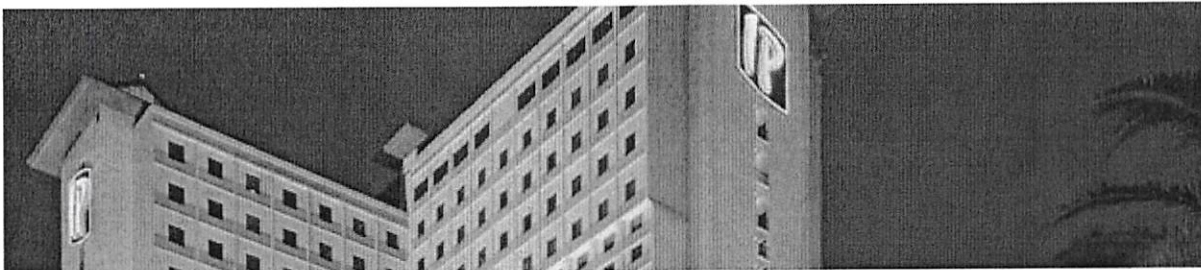
**Kesha Jackson**

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**From:** IP Casino Resort Spa <donotreply@boydgamingmail.com>  
**Sent:** Tuesday, May 7, 2024 11:21 AM  
**To:** NASON WHITE  
**Subject:** IP Casino Resort Spa Reservation Confirmation

***CAUTION! External Content. Please use caution when opening attachments and links. Do not provide your username and password if requested.***

IP Casino Resort Spa Reservation Confirmation



## CONFIRMATION INFORMATION

Dear NASON WHITE ,

Please take a moment to review your reservation information below. You can make changes to this reservation by calling 877-335-4831.

Here are your reservation details:

Name:	NASON WHITE
Confirmation Number:	DQP2W
Arrival Date:	Monday, 06/10/2024

Departure Date: Thursday, 06/13/2024  
 Check-in Time: 04:00 PM  
 Check-out Time: 11:00 AM  
 Number of Nights: 3  
 Number of Rooms: 1  
 Room Type: IP/D2  
 Room Description: STD Q/Q NONSMKG

Please note a refundable deposit equal to the first nights' room and tax will be charged on your credit card at the time of booking to guarantee your reservation. Cancellations must be made at least 24 hours prior to arrival to avoid forfeiting the deposit amount unless a non-refundable offer is booked, then no refund is provided. Packages, offers and special events may require different deposits and cancellation periods. \$100 authorization is required at check-in. Reservations are non-transferrable. Rates do not include the nightly resort fee of \$16.05 (tax included) which will be charged at check-in.

**Reservation Information**

Stay Total: 299.97  
 Stay Tax: 36.00  
 Stay Total w/Tax: 335.97

Deposit Received: 111.99

Date	Rate	Nights
6/10/24	111.99	3

This is an automated message. Please call 877-335-4831 if you have any questions or would like to make changes to your reservation.



**IP Casino Resort Spa - Biloxi**  
 850 Bayview Avenue • Biloxi, MS 39530  
[ipbiloxi.boydgaming.com](http://ipbiloxi.boydgaming.com)  
 1-888-946-2847

**Kesha Jackson**

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**From:** IP Casino Resort Spa <donotreply@boydgamingmail.com>  
**Sent:** Tuesday, June 11, 2024 10:46 AM  
**To:** Kesha Jackson  
**Subject:** IP Casino Resort Spa Folio

***CAUTION! External Content. Please use caution when opening attachments and links. Do not provide your username and password if requested.***



Dear **NASON WHITE** (BROWN) ,

Thank you for staying with us. We hope you took advantage of all the IP Biloxi has to offer.

We invite you to stay with us again.

Can't wait to see you during your next visit to with us.

Sincerely,  
IP Casino Resort Spa

Date	Ref	Description	Charge	Credit	Balance
06/10/2024	454524342775	APPLIED DEPOSIT		-111.99	
		*****2740			
06/10/2024	454524342777	APPLIED DEPOSIT		-232.98	
		*****2740			

06/10/2024	454529100135	RESORT FEE	16.05	
		\$15 RESORT FEE + TAX		
06/10/2024	454529100136	RESORT FEE	15.00	
		\$15 RESORT FEE***NO TAX**		
06/10/2024	454529100137	RESORT FEE		-16.05
		REVERSAL OF \$15+TX RESORT		
06/10/2024	454529100687	ROOM CHARGE IP 1319	99.99	
		Calendar MASF24C		
		SUMMARY OF CHARGES		
		ROOM	114.99	
		BALANCE DUE		-229.98



**IP Casino Resort Spa - Biloxi**  
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1-888-946-2847

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Gambling Problem? Call 1-800-GAMBLER

CCREVG

06/11/2024

IP CASINO RESORT SPA

10:48 AM

CCREVM

Guest Credit Card Transaction Review

Arrive: 05/06/2024 Depart: 05/11/2024

PHILLIPS, LORETTA

X=Reprint Receipt M=Void Authorization

Sts	Exp	Entry	Amount	Auth	Code	Invoice	User	Trans	Date	Time					
Dft	Action	Resp	Mth	Credit	Card	Date	Type	Amount	Auth	Code	Invoice	User	Trans	Date	Time
	Auth	Approve	RVS	471562*****2740		*127	Keyed	89.59	049186		1710914	[REDACTED]	05/20/2024	02:11 PM	
	Settle		RVS	471562*****2740		*127	Keyed	89.59	049186		1710914	[REDACTED]	05/20/2024	02:12 PM	
	Auth	Approve	RVS	471562*****2740		*127	Keyed	192.38	096620		1710924	[REDACTED]	05/20/2024	02:34 PM	
	Settle		RVS	471562*****2740		*127	Keyed	192.38	096620		1710924	[REDACTED]	05/20/2024	02:34 PM	

Bottom

F3=Exit

F11=Toggle

CCREXXG

06/11/2024

IP CASINO RESORT SPA  
Guest Credit Card Transaction Review

10:48 AM

CCREXXW

GRIFFINS, CLARA

Arrive: 09/08/2024 Depart: 09/11/2024

X=Reprint Receipt W=Void Authorization

Dft	Action	Resp	Mth	Credit Card	Exp Date	Entry Type	Amount	Auth Code	Invoice	User	Trans Date	Trans Time
Auth	Approve		RVS	471562*****2740	*12?	Keyed	89.59	006049	1710915	[REDACTED]	05/20/2024	02:13 PM
Settle			RVS	471562*****2740	*12?	Keyed	89.59	006049	1710915	[REDACTED]	05/20/2024	02:13 PM
Auth	Approve		RVS	471562*****2740	*12?	Keyed	192.38	060289	1710927	[REDACTED]	05/20/2024	02:36 PM
Settle			RVS	471562*****2740	*12?	Keyed	192.38	060289	1710927	[REDACTED]	05/20/2024	02:36 PM

Bottom

F3=Exit

F11=Toggle

CCREVG 06/11/2024

IP CASINO RESORT SPA

10:48 AM

CCREVM

Guest Credit Card Transaction Review

Arrive: 05/05/2024 Depart: 05/11/2024

PHILLIPS, LORETTA

X=Reprint Receipt M=Void Authorization

Dft	Action	Resp	Mth	Credit Card	Exp	Entry	Date	Type	Amount	Auth Code	Invoice	User	Trans Date	Time
	Auth	Approve	RVS	471562*****2740	*127	Keyed			89.59	049186	1710914	[REDACTED]	05/20/2024	02:13 PM
	Settle		RVS	471562*****2740	*127	Keyed			89.59	049186	1710914	[REDACTED]	05/20/2024	02:12 PM
	Auth	Approve	RVS	471562*****2740	*127	Keyed			192.36	096620	1710924	[REDACTED]	05/20/2024	02:34 PM
	Settle		RVS	471562*****2740	*127	Keyed			192.36	096620	1710924	[REDACTED]	05/20/2024	02:34 PM

Bottom

F3=Exit

F11=Toggle



CCREXG 06/11/2024

IP CASINO RESORT SPA  
Guest Credit Card Transaction Review

10:48 AM

CCREXV

GRIFINS, CLARA

Arrive: 09/06/2024 Depart: 09/06/2024

X=Reprint Receipt W=Void Authorization  
 Sls St1  
 Dft Action Resp Mth Credit Card  
 Auth Approve RVS 471562\*\*\*\*\*2740  
 Settle RVS 471562\*\*\*\*\*2740  
 Auth Approve RVS 471562\*\*\*\*\*2740  
 Settle RVS 471562\*\*\*\*\*2740

Exp	Entry	Amount	Auth Code	Invoice	User	Trans Date	Time
*127	Keyed	89.59	006049	1710915	[REDACTED]	05/20/2024	02:13 PM
*127	Keyed	89.59	006049	1710915	[REDACTED]	05/20/2024	02:13 PM
*127	Keyed	192.38	060289	1710927	[REDACTED]	05/20/2024	02:36 PM
*127	Keyed	192.38	060289	1710927	[REDACTED]	05/20/2024	02:36 PM

Bottom

F3=Exit

F11=Toggle