




# 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

October 21, 2024

To: Board of Supervisors

From: Kesha Jackson, Purchasing Clerk 

Subject: October 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: 10/1/2024

<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>
<b>BOS1 CARD</b>	Abonie Robicheaux	lodging	9/2/2024	Natchez Grand Hotel	\$460.55	meeting
	Jennifer Knight	lodging	9/2/2024	Natchez Grand Hotel	\$460.55	meeting
	Jennifer Knight	lodging	9/12/2024	Brett Robinson Gulf	\$976.31	meeting
	Albert Jones	lodging	9/12/2024	Brett Robinson Gulf	\$949.75	meeting
	LaTashee McLaurin	lodging	9/12/2024	Brett Robinson Gulf	\$912.11	meeting
	Jamie Ballard	airline	9/12/2024	American Airline	\$264.48	meeting
	Amy Nisbett	airline	9/12/2024	American Airline	\$264.48	meeting
	Jamie Ballard	airline	9/12/2024	Delta Airline	\$228.98	meeting
	Amy Nisbett	airline	9/12/2024	Delta Airline	\$228.98	meeting
	Paul Griffin	lodging	9/13/2024	Horseshoe Hotel	(\$27.80)	meeting
	Mike Espy	lodging	9/13/2024	Horseshoe Hotel	\$315.38	meeting
	Karl Banks	lodging	9/13/2024	Horseshoe Hotel	\$315.38	meeting
	Steven Staford	lodging	9/18/2024	Hampton Inn Natchez	\$150.00	meeting
	Adrian Anderson	lodging	9/18/2024	Holiday Inn Natchez	\$178.00	meeting
	Deanna Germany	lodging	9/18/2024	Holiday Inn Natchez	\$181.50	meeting
	Kandi Gray	lodging	9/18/2024	Holiday Inn Natchez	\$178.00	meeting
	Jacqline Wright	lodging	9/20/2024	Holiday Inn Natchez	(\$31.00)	meeting
	Matt Herr	lodging	9/20/2024	Holiday Inn Natchez	(\$31.00)	meeting
	Jacqline Wright	lodging	9/20/2024	Holiday Inn Natchez	\$301.00	meeting
	Matt Herr	lodging	9/20/2024	Holiday Inn Natchez	\$301.00	meeting
	Jeffery Hunter	lodging	9/20/2024	Holiday Inn Natchez	\$301.00	meeting
	Jacque Purnell	lodging	9/20/2024	Holiday Inn Natchez	\$301.00	meeting
	Jared Tomlinson	lodging	9/20/2024	Holiday Inn Natchez	\$304.00	meeting
	Staci Oneal	lodging	9/20/2024	Hampton Inn Natchez	\$300.00	meeting
	Jeff Adair	lodging	9/20/2024	Holiday Inn Natchez	\$301.00	meeting
	Adrian Anderson	lodging	9/20/2024	Holiday Inn Natchez	\$301.00	meeting
	Danny Spivey	lodging	9/20/2024	Hampton Inn Natchez	\$398.00	meeting
	Jamie Ballard	lodging	9/20/2024	Hampton Inn Natchez	\$300.00	meeting
	Kandi Gray	lodging	9/20/2024	Holiday Inn Natchez	\$301.00	meeting
	Deanna Germany	lodging	9/20/2024	Holiday Inn Natchez	\$301.00	meeting
	Lance Felton	lodging	9/20/2024	Hampton Inn Natchez	\$300.00	meeting
	Amy Nisbett	lodging	9/20/2024	Hampton Inn Natchez	\$300.00	meeting
	Avis Stringer	lodging	9/20/2024	Hampton Inn Natchez	\$300.00	meeting
<b>BOS1 CARD TOTAL</b>						
<b>TOTAL TO PAY</b>					<b>\$10,584.65</b>	

*NOTE: There will be credit return on the taxes for lodging (Holiday Inn Natchez)*



### Summary of Account Activity

Total Activity	\$10,584.65
Credit Limit	\$20,000.00
Cash Advance Limit	\$3,500.00
Statement Closing Date	10/01/24
Days in Billing Cycle	30

Cardholder Name  
MADISON COUNTY BOS

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

Account Number  
XXXX XXXX XXXX 2740

Page 1 of 6

#### 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
09/02	09/03	24183104246900015457280	NATCHEZ GRAND HOTEL 601-4453506 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039120	460.55
09/02	09/03	24183104246900015459419	NATCHEZ GRAND HOTEL 601-4453506 MS 7011: LODGING, HOTELS, MOTELS, RESORTS 000039120	460.55
09/12	09/13	24755424257152574001259	BRETT ROBINSON GULF CORP GULF SHORES AL 7011: LODGING, HOTELS, MOTELS, RESORTS 000036542 CHECK IN/OUT: 10/12/2024	976.31
09/12	09/13	24755424257152574001267	BRETT ROBINSON GULF CORP GULF SHORES AL 7011: LODGING, HOTELS, MOTELS, RESORTS 000036542 CHECK IN/OUT: 10/12/2024	949.75
09/12	09/13	24755424257152574001275	BRETT ROBINSON GULF CORP GULF SHORES AL 7011: LODGING, HOTELS, MOTELS, RESORTS 000036542 CHECK IN/OUT: 10/12/2024	912.11
09/12	09/13	24035964256053911067367	AMERICAN AIR0012175757331FORT WORTH TX	264.48



CARD CENTER  
PO BOX 419734  
KANSAS CITY MO 64141-6734

Account Number XXXX XXXX XXXX 2740  
New Balance \$10,584.65  
Statement Date 10/01/24

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

\*\*\*N0017717

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





Cardholder Name: MADISON COUNTY BOS

Account Number: XXXX XXXX XXXX 2740

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

Transaction Date	Posting Date	Reference Number	Description	Amount
		3001: AMERICAN AIRLINES 000076155	NAME: NISBETT/AMY TICKET #: 0012175757331 LEG 1: FLIGHT #: DATE: 11/19/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: DCA ORIGINATION: JAN	
09/12	09/13	24035964256053904371578	AMERICAN AIR0012175757045FORT WORTH TX	264.48
		3001: AMERICAN AIRLINES 000076155	NAME: BALLARD/JAMIE TICKET #: 0012175757045 LEG 1: FLIGHT #: DATE: 11/19/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: DCA ORIGINATION: JAN	
09/12	09/13	24717054257872571085334	DELTA AIR 0062267289269800-2211212 CA	228.98
		3058: DELTA 000030354	NAME: NISBETT/AMY DAV TICKET #: 0062267289269 LEG 1: FLIGHT #: DATE: 11/21/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: ATL ORIGINATION: DCA LEG 2: FLIGHT #: DATE: 11/21/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: JAN ORIGINATION: ATL LEG 3: FLIGHT #: DATE: 11/21/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: ORIGINATION: JAN	
09/12	09/13	24717054257872570749682	DELTA AIR 0062267061437800-2211212 CA	228.98
		3058: DELTA 000030354	NAME: BALLARD/JAMIE TICKET #: 0062267061437 LEG 1: FLIGHT #: DATE: 11/21/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: ATL ORIGINATION: DCA LEG 2: FLIGHT #: DATE: 11/21/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: JAN ORIGINATION: ATL LEG 3: FLIGHT #: DATE: 11/21/2024 DEPARTURE TIME: 00:00 ARR TIME: 00:00 DEST: ORIGINATION: JAN	
09/13	09/15	74943004257054371177217	HORSESHOE CASINO & HOTEL 8662094732 MS	-27.80
		3731: HARRAH S HOTELS AND CASINOS 000038664		
09/13	09/15	24943004257054371177196	HORSESHOE CASINO & HOTEL 8662094732 MS	315.38
		3731: HARRAH S HOTELS AND CASINOS 000038664		

9465KPA - 017732 - 0001 - 0003

Cardholder Name: MADISON COUNTY BOS

Account Number: XXXX XXXX XXXX 2740

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

Transaction Date	Posting Date	Reference Number	Description	Amount
09/13	09/15	24943004257054371177204	CHECK IN/OUT: 08/08/2024 HORSESHOE CASINO & HOTEL 8662094732 MS 3731: HARRAH S HOTELS AND CASINOS 000038664	315.38
09/18	09/20	24755424263172632850788	CHECK IN/OUT: 08/08/2024 HAMPTON INNS 240-6547655 MS 3665: HAMPTON INNS HOTELS 000039157	150.00
09/18	09/20	24943004263057955219229	CHECK IN/OUT: 09/18/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	178.00
09/18	09/20	24943004263057955219245	CHECK IN/OUT: 09/17/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	181.50
09/18	09/20	24943004263057955219237	CHECK IN/OUT: 09/17/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	178.00
09/20	09/22	74943004265059216241466	CHECK IN/OUT: 09/17/2024 HOLIDAY INN EXPRESS & SU 6625828626 MS 3501: HOLIDAY INNS 000039120	-31.00
09/20	09/22	74943004265059216241474	CHECK IN/OUT: 09/17/2024 HOLIDAY INN EXPRESS & SU 6625828626 MS 3501: HOLIDAY INNS 000039120	-31.00
09/20	09/22	24943004265059216241214	HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	301.00
09/20	09/22	24943004265059216241230	CHECK IN/OUT: 09/18/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	301.00
09/20	09/22	24943004265059216241289	CHECK IN/OUT: 09/18/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	301.00
09/20	09/22	24943004265059216241388	CHECK IN/OUT: 09/18/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	301.00
09/20	09/22	24943004265059216241503	CHECK IN/OUT: 09/18/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	304.00
09/20	09/22	24755424265172650703057	CHECK IN/OUT: 09/18/2024 HAMPTON INNS 240-6547655 MS 3665: HAMPTON INNS HOTELS 000039157	300.00
09/20	09/22	24943004265059216241511	CHECK IN/OUT: 09/18/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	301.00
09/20	09/22	24943004265059216241255	CHECK IN/OUT: 09/18/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	301.00
09/20	09/22	24755424265172650702810	CHECK IN/OUT: 09/18/2024 HAMPTON INNS 240-6547655 MS 3665: HAMPTON INNS HOTELS 000039157	398.00 *
09/20	09/22	24755424265172650703008	CHECK IN/OUT: 09/18/2024 HAMPTON INNS 240-6547655 MS 3665: HAMPTON INNS HOTELS 000039157	300.00
09/20	09/22	24943004265059216241495	CHECK IN/OUT: 09/18/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	301.00
09/20	09/22	24943004265059216241263	CHECK IN/OUT: 09/18/2024 HOLIDAY INN EXPRESS & SU 6014424462 MS 3501: HOLIDAY INNS 000039120	301.00
09/20	09/22	24755424265172650703016	CHECK IN/OUT: 09/18/2024 HAMPTON INNS 240-6547655 MS 3665: HAMPTON INNS HOTELS 000039157	300.00
09/20	09/22	24755424265172650702877	CHECK IN/OUT: 09/18/2024 HAMPTON INNS 240-6547655 MS 3665: HAMPTON INNS HOTELS 000039157	300.00
			CHECK IN/OUT: 09/18/2024	



Cardholder Name: MADISON COUNTY BOS

Account Number: XXXX XXXX XXXX 2740

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

Transaction Date	Posting Date	Reference Number	Description	Amount
09/20	09/22	24755424265172650702943 3665: HAMPTON INNS HOTELS	HAMPTON INNS 000039157 CHECK IN/OUT: 09/18/2024	240-6547655 MS 300.00

Cardholder Name: MADISON COUNTY BOS

Account Number: XXXX XXXX XXXX 2740

## **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

**Kesha Jackson**

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**From:** Natchez Grand Hotel and Suites <naomi\_h822\_natchez\_com@mail-pm.webrez.com>  
**Sent:** Wednesday, April 3, 2024 10:07 AM  
**To:** Kesha Jackson  
**Subject:** Natchez Grand Hotel and Suites- confirmation

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

Dear EBONIE ROBICHEAUX,

Thank you for booking at the Natchez Grand Hotel and Suites. Please print this page for your records.

The Natchez Grand Hotel and Suites offers personalized services to give our guests an insider's view of historic Natchez. This includes assistance with in-room amenities for special occasions, restaurant reservations, and much more. We recommend that your visit includes dining at Monmouth Historic Inn's Restaurant 1818, rated # 1 on [Tripadvisor.com](https://www.tripadvisor.com), the only true Antebellum Home dining experience in Natchez. Romance packages and other seasonal specials are also available. For any special needs or requests, please feel free to contact us prior to your arrival. For special requests, at least 72 hours notice and payment is required. Please call The Natchez Grand Hotel at 601 446 9994 to inquire about Romance package.

While celebrating any special occasion, our team can assist you with a truly personalized hotel experience. Our Personal Touch Add-ons Menu offers a vast range of selections to help you create an unforgettable stay while visiting Natchez. From Champagne to Roses and Chocolates to Cheese, we set the scene according to your unique selections prior to check in so you can relax and focus on the special experience. For more booking information, please contact The Natchez Grand Hotel.

Your hotel reservation is confirmed and your confirmation number is 41898873.

**COVID 19 SAFETY NOTICE:**

We understand that COVID-19 virus has impacted Mississippi. However, Natchez has experienced little impact and none at Natchez Grand Hotel. At Natchez Grand Hotel we are committed to making the adjustments that follow the guidelines and protocol set forth by the CDC and WHO regarding cleaning and hygiene. Keeping our guests and staff healthy is of the utmost importance, while we continue to offer exceptional service and hospitality.

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**1) Hotel information**

**Name:** Natchez Grand Hotel and Suites  
**Address:** 111 S. Broadway St., Natchez, Mississippi, United States, 39120  
**Telephone:** 601.446.9994  
**Fax:** 601.446.9957  
**Toll Free:** 866.488.0898



Email: reservations@natchezgrandhotel.com

Website: <http://www.natchezgrandhotel.com>

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## 2) Guest information

Name: EBONIE ROBICHEAUX

Address: P O BOX 608  
Canton MS 39046

Telephone: 601-855-5534

Email: keshajackson@madison-co.com

Company name: MESAPA -Mississippi Emergency Services Administrative Profes

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## 3) Room information

Confirmation #: 41898873

Room type: Superior King River View

Rate: MESAPA - Emergency Services

Check-in: 04:00 PM Tue, Sep 3, 2024

Check-out: 11:00 AM Fri, Sep 6, 2024

Rooms: 1

Nights: 3

Adults: 2

Value Package: \$14.95

Cancellation policy: The Natchez Grand Hotel and Suites requires at least a 72 hour notice of cancellation prior to your arrival date to avoid penalty. Reservations that are not cancelled at least 3 days prior to arrival will be penalized 1 night's room and tax. The full cost of your stay will be charged within 72 hours of arrival. The hotel does enforce an early departure fee of one night's room and tax. If your credit card is declined prior to your arrival date, your reservation will be cancelled. During The Natchez Balloon Festival Weekend, October 18th and 19th 2024, the Natchez Grand Hotel requires 50% deposit 90 days prior to the arrival date and 30 days prior to the arrival date the remaining balance will be charged. Any reservations that are cancelled inside 45 days, guest forfeit 50% of the cost of the reservation. If any reservations are cancelled inside 30 days, the guest forfeit the full amount (NON-REFUNDABLE).

Guarantee policy: The Natchez Grand Hotel charges the full amount of your stay 72 hours prior to the arrival date. When booking your reservation, the Natchez Grand Hotel reserves the right to authorize your card to confirm validation only. The hotel also charges a non-optional Value Added Package of \$14.95 plus tax per night, which includes, hot full breakfast buffet, 24 hour access to our business and fitness center with wireless, high-speed Internet access throughout the hotel,unlimited local and long distance telephone calls, outdoor pool access, and usage of the in room safe with up to \$20,000 insurance. Credit Card Acceptance Fee- 3.5 % of the room rate to cover the cost of credit card fees will be added to the reservation.

Parking policy: Self parking is available on property.

Guest agreement: The guest has agreed to the cancellation and guarantee policies

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## 4) Rate information (USD)

Room cost		Sep 3, 2024	119.00
Room cost		Sep 4, 2024	119.00
Room cost		Sep 5, 2024	119.00
Value Package			44.85
Credit Card Processing Fee			12.50
Sub-total	414.35		
Occ Tax	6.00		
State	28.14		
City	12.06		
Total cost	460.55		
Balance due	460.55		

*Refund taxes*

The Natchez Grand Hotel & Suites has a non-optional VALUE-ADDED PACKAGE of \$14.95 per room per night.

Your VALUE-ADDED PACKAGE includes, hot full breakfast buffet, 24 hour access to our business and fitness center with wireless, high-speed Internet access throughout the hotel, unlimited local and long distance telephone calls, outdoor pool access, and usage of the in room safe with up to \$20,000 insurance.

Should you have any questions or concerns, please call us directly at 601-446-9994 or 1-866-488-0898.

## Kesha Jackson

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**From:** Natchez Grand Hotel and Suites <naomi\_h822\_natchez\_com@mail-pm.webrez.com>  
**Sent:** Wednesday, April 3, 2024 10:06 AM  
**To:** Kesha Jackson  
**Subject:** Natchez Grand Hotel and Suites- confirmation

***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 booking at the Natchez Grand Hotel and Suites. Please print this page for your records.

The Natchez Grand Hotel and Suites offers personalized services to give our guests an insider's view of historic Natchez. This includes assistance with in-room amenities for special occasions, restaurant reservations, and much more. We recommend that your visit includes dining at Monmouth Historic Inn's Restaurant 1818, rated # 1 on [Tripadvisor.com](https://www.tripadvisor.com), the only true Antebellum Home dining experience in Natchez. Romance packages and other seasonal specials are also available. For any special needs or requests, please feel free to contact us prior to your arrival. For special requests, at least 72 hours notice and payment is required. Please call The Natchez Grand Hotel at 601 446 9994 to inquire about Romance package.

While celebrating any special occasion, our team can assist you with a truly personalized hotel experience. Our Personal Touch Add-ons Menu offers a vast range of selections to help you create an unforgettable stay while visiting Natchez. From Champagne to Roses and Chocolates to Cheese, we set the scene according to your unique selections prior to check in so you can relax and focus on the special experience. For more booking information, please contact The Natchez Grand Hotel.

Your hotel reservation is confirmed and your confirmation number is 41898856.

### **COVID 19 SAFETY NOTICE:**

We understand that COVID-19 virus has impacted Mississippi. However, Natchez has experienced little impact and none at Natchez Grand Hotel. At Natchez Grand Hotel we are committed to making the adjustments that follow the guidelines and protocol set forth by the CDC and WHO regarding cleaning and hygiene. Keeping our guests and staff healthy is of the utmost importance, while we continue to offer exceptional service and hospitality.

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### **1) Hotel information**

**Name:** Natchez Grand Hotel and Suites  
**Address:** 111 S. Broadway St., Natchez, Mississippi, United States, 39120  
**Telephone:** 601.446.9994  
**Fax:** 601.446.9957  
**Toll Free:** 866.488.0898

Email: reservations@natchezgrandhotel.com

Website: <http://www.natchezgrandhotel.com>

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## 2) Guest information

Name: JENNIFER KNIGHT

Address: P O BOX 608  
Canton MS 39046

Telephone: 601-855-5534

Email: keshajackson@madison-co.com

Company name: MESAPA -Mississippi Emergency Services Administrative Profes

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## 3) Room information

Confirmation #: 41898856

Room type: Superior King River View

Rate: MESAPA - Emergency Services

Check-in: 04:00 PM Tue, Sep 3, 2024

Check-out: 11:00 AM Fri, Sep 6, 2024

Rooms: 1

Nights: 3

Adults: 2

Value Package: \$14.95

Cancellation policy: The Natchez Grand Hotel and Suites requires at least a 72 hour notice of cancellation prior to your arrival date to avoid penalty. Reservations that are not cancelled at least 3 days prior to arrival will be penalized 1 night's room and tax. The full cost of your stay will be charged within 72 hours of arrival. The hotel does enforce an early departure fee of one night's room and tax. If your credit card is declined prior to your arrival date, your reservation will be cancelled. During The Natchez Balloon Festival Weekend, October 18th and 19th 2024, the Natchez Grand Hotel requires 50% deposit 90 days prior to the arrival date and 30 days prior to the arrival date the remaining balance will be charged. Any reservations that are cancelled inside 45 days, guest forfeit 50% of the cost of the reservation. If any reservations are cancelled inside 30 days, the guest forfeit the full amount (NON-REFUNDABLE).

Guarantee policy: The Natchez Grand Hotel charges the full amount of your stay 72 hours prior to the arrival date. When booking your reservation, the Natchez Grand Hotel reserves the right to authorize your card to confirm validation only. The hotel also charges a non-optional Value Added Package of \$14.95 plus tax per night, which includes, hot full breakfast buffet, 24 hour access to our business and fitness center with wireless, high-speed Internet access throughout the hotel,unlimited local and long distance telephone calls, outdoor pool access, and usage of the in room safe with up to \$20,000 insurance. Credit Card Acceptance Fee- 3.5 % of the room rate to cover the cost of credit card fees will be added to the reservation.

Parking policy: Self parking is available on property.

Guest agreement: The guest has agreed to the cancellation and guarantee policies

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## 4) Rate information (USD)

Room cost		Sep 3, 2024	119.00
Room cost		Sep 4, 2024	119.00
Room cost		Sep 5, 2024	119.00
Value Package			44.85
Credit Card Processing Fee			12.50
Sub-total	414.35		
Occ Tax	6.00		
State	28.14		
City	12.06		
Total cost	460.55		
Balance due	460.55		

*Refund taxes*

The Natchez Grand Hotel & Suites has a non-optional VALUE-ADDED PACKAGE of \$14.95 per room per night.

Your VALUE-ADDED PACKAGE includes, hot full breakfast buffet, 24 hour access to our business and fitness center with wireless, high-speed Internet access throughout the hotel, unlimited local and long distance telephone calls, outdoor pool access, and usage of the in room safe with up to \$20,000 insurance.

Should you have any questions or concerns, please call us directly at 601-446-9994 or 1-866-488-0898.



Natchez Grand Hotel and Suites  
 111 Broadway Street  
 Natchez, MS, USA 39120

# Check-out receipt

Name: ABONIE ROBICHEAUX  
 Check-in: Tuesday, Sep 3, 2024  
 Check-out: Friday, Sep 6, 2024  
 Confirmation #: 41898873  
 Invoice number: 314986  
 Invoice date: 09/06/2024

Unit assignment: 316

*Credit*

Attn: ABONIE ROBICHEAUX  
 MESAPA -Mississippi Emergency Services Administrat  
 P O BOX 608  
 Canton MS 39046  
 United States

*Kesha.jackson@madison-co.com*

Date	Description of services	Cost(USD)
09/03/2024	Unit 316: Superior King River View - MESAPA - Emergency Services	119.00
09/03/2024	Credit Card Processing Fee: Credit Card Processing Fee	12.50
09/03/2024	Value Package: \$14.95	14.95
09/04/2024	Unit 316: Superior King River View - MESAPA - Emergency Services	119.00
09/04/2024	Value Package: \$14.95	14.95
09/05/2024	Unit 316: Superior King River View - MESAPA - Emergency Services	119.00
09/05/2024	Value Package: \$14.95	14.95
10/14/2024	Amenity Package 1@ -44.85 - Guest is tax exempt	-44.85
10/14/2024	Occupancy Tax	-6.00
10/14/2024	State Tax	-25.00
10/14/2024	City Tax	-10.71
10/14/2024	Amenity Package Non Taxable	44.85
<b>Sub-total</b>		<b>372.64</b>
City		10.71
Occ Tax		6.00
State		25.00
<b>Total</b>		<b>414.35</b>
Sep 1, 2024, VI XXXX 2740		460.55
Oct 14, 2024, VI XXXX 2740		-46.20
<b>Amount due (USD)</b>		<b>0.00</b>

Safety deposit boxes are available for deposit of valuables. The Natchez Grand Hotel cannot be responsible for valuables not deposited. Rates do not include applicable sales, occupancy, or other taxes. At check-in, we will require a credit card but at check out you may pay with cash. 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 association fails to pay the full amount of these charges. I agree to depart accommodations by 11:00 AM on the date indicated above. \$250 fee will be applied for smoking in our guest rooms. Additionally, there will be a \$250 fee for unauthorized pets. The hotel also enforces an early departure fee of one night room and tax.

Customer signature: \_\_\_\_\_



Natchez Grand Hotel and Suites  
 111 Broadway Street  
 Natchez, MS, USA 39120

# Check-out receipt

Name: JENNIFER KNIGHT  
 Check-in: Tuesday, Sep 3, 2024  
 Check-out: Friday, Sep 6, 2024  
 Confirmation #: 41898856  
 Invoice number: 314985  
 Invoice date: 09/06/2024

Unit assignment: 314

Attn: JENNIFER KNIGHT  
 MESAPA -Mississippi Emergency Services Administrat  
 P O BOX 608  
 Canton MS 39046  
 United States

*Credit*

Date	Description of services	Cost(USD)
09/03/2024	Unit 314: Superior King River View - MESAPA - Emergency Services	119.00
09/03/2024	Credit Card Processing Fee: Credit Card Processing Fee	12.50
09/03/2024	Value Package: \$14.95	14.95
09/04/2024	Unit 314: Superior King River View - MESAPA - Emergency Services	119.00
09/04/2024	Value Package: \$14.95	14.95
09/05/2024	Unit 314: Superior King River View - MESAPA - Emergency Services	119.00
09/05/2024	Value Package: \$14.95	14.95
10/14/2024	Amenity Package 1@ -44.85 - GUEST IS TAX EXEMPT	-44.85
10/14/2024	Occupancy Tax - OCC TAX	-6.00
10/14/2024	State Tax - STATE TAX	-25.00
10/14/2024	City Tax - CITY TAX	-16.71
10/14/2024	Amenity Package Non Taxable - AMENTIY PACKAGE NON TAXABLE	44.85
<b>Sub-total</b>		<b>366.64</b>
City		16.71
Occ Tax		6.00
State		25.00
<b>Total</b>		<b>414.35</b>
Sep 1, 2024, VI XXXX 2740		460.55
Oct 14, 2024, VI XXXX 2740		-46.20
<b>Amount due (USD)</b>		<b>0.00</b>

Safety deposit boxes are available for deposit of valuables. The Natchez Grand Hotel cannot be responsible for valuables not deposited. Rates do not include applicable sales, occupancy, or other taxes. At check-in, we will require a credit card but at check out you may pay with cash. 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 association fails to pay the full amount of these charges. I agree to depart accommodations by 11:00 AM on the date indicated above. \$250 fee will be applied for smoking in our guest rooms. Additionally, there will be a \$250 fee for unauthorized pets. The hotel also enforces an early departure fee of one night room and tax.

Customer signature: \_\_\_\_\_

# Brett-Robinson Gulf Corp

# Receipt

**Guest Name:** Jennifer Carpenter Knight

Thursday, September 12, 2024

**Address:** 618 Twin Harbor Place  
Madison, MS 39110  
United States

**Reservation:** 20308516

**Property  
(Type):** Phoenix VII 71009

**Stay:** Oct 12, 2024 to Oct 16, 2024

**Type:** Payment

**Auth Only:** No

**Total:** \$976.31



**Paid By:**

Credit Card

VISA No. \*\*\*\*\*2740

Expires: 01-2027



**Kesha Jackson**

---

**From:** Brett/Robinson Vacation Rentals <info@brett-robinson.com>  
**Sent:** Monday, August 12, 2024 11:54 AM  
**To:** Kesha Jackson  
**Subject:** (\$86.00)Invoice - Confirmation # 20308517

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**Brett Robinson**

800-211-7892  
[www.brett-robinson.com](http://www.brett-robinson.com)

**GUEST RECEIPT**

Albert Jones III	Account No: 20308517	Arrival: Oct 12, 2024
1633 West Peace Street	Unit No: P7 7316	Departure: Oct 16, 2024
Canton, MS 39046 US	#Guests: 2	Nights: 4

**Room Charge:** \$774.00  
**Avg Daily Rate:** \$193.50  
**Discount:** (\$86.00)  
**Travel Insurance:** \$0.00  
**Fees:** \$422.58

Convenience Fee: \$35.58  
Departure Clean: \$284.00  
Res Fee: \$100.00  
Telephone Access: \$3.00

**Taxes: \$185.76**

**Grand Total: \$1,382.34**

**Total Payments: \$432.59**

**BALANCE OWED: \$949.75**



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**Brett-Robinson Vacation Rentals**  
3259 Gulf Shores Parkway  
Gulf Shores, AL 36542

**Kesha Jackson**

---

**From:** Brett/Robinson Vacation Rentals <info@brett-robinson.com>  
**Sent:** Monday, August 12, 2024 11:52 AM  
**To:** Kesha Jackson  
**Subject:** (\$81.30)Invoice - Confirmation # 20308518

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Brett Robinson

800-211-7892  
[www.brett-robinson.com](http://www.brett-robinson.com)

### GUEST RECEIPT

Latashee McLaurin	Account No: 20308518	Arrival: Oct 12, 2024
1633 West Peace Street	Unit No: P7 7810	Departure: Oct 16, 2024
Canton, MS 39046 US	#Guests: 2	Nights: 4

**Room Charge:** \$731.70

**Avg Daily Rate:** \$182.93

**Discount:** (\$81.30)

**Travel Insurance:** \$0.00

**Fees:** \$421.45

Convenience Fee: \$34.45  
Departure Clean: \$284.00  
Res Fee: \$100.00  
Telephone Access: \$3.00

**Taxes: \$179.00**

**Grand Total: \$1,332.15**

**Total Payments: \$420.04**

**BALANCE OWED: \$912.11**

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Brett-Robinson Vacation Rentals  
3259 Gulf Shores Parkway  
Gulf Shores, AL 36542

**Kesha Jackson**

---

**From:** American Airlines <no-reply@info.email.aa.com>  
**Sent:** Thursday, September 12, 2024 9:41 AM  
**To:** Kesha Jackson  
**Subject:** Your trip confirmation (JAN - DCA)

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

American 

Issued: September 12, 2024

# Your trip confirmation and receipt

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

Confirmation code: YLXSQB

**Tuesday, November 19, 2024**



**JAN**

Jackson  
6:00 AM

AA 5359

Operated by PSA Airlines as American Eagle



**DCA**

Washington Reagan  
9:29 AM

Seat: 17F  
Class: Economy (Q)  
Meals:

[Manage your trip](#)

## Your purchase

**Jamie Ballard**

Join the AAdvantage® Program

New ticket (0012175757045) \$264.48  
[\$231.98 + Taxes & carrier-imposed fees \$32.50]

---

**Total cost** \$264.48

## Your payment

Visa (ending 2740 ) \$264.48

---

**Total paid** \$264.48



## Bag information

### Checked Bag (Airport)

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

### Checked Bag (Online\*)

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  
Bag fees apply at each Check-in location. Additional allowances and/or discounts may apply.  
For information regarding American Airlines checked baggage policies, please visit: 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)

**Personal item** A small purse, briefcase, laptop bag, or similar item that must fit under the seat in front of you.

---

**Carry-on** Maximum dimensions must not to exceed: 22" long x 14" wide x 9" tall (56 x 35 x 23 cm).

**Kesha Jackson**

---

**From:** American Airlines <no-reply@info.email.aa.com>  
**Sent:** Thursday, September 12, 2024 9:38 AM  
**To:** Kesha Jackson  
**Subject:** Your trip confirmation (JAN - DCA)

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

American 

Issued: September 12, 2024

# Your trip confirmation and receipt

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

Confirmation code: IQRFSJ

Tuesday, November 19, 2024



**JAN**

Jackson  
6:00 AM

AA 5359

Operated by PSA Airlines as American Eagle



**DCA**

Washington Reagan  
9:29 AM

Seat: 17D  
Class: Economy (Q)  
Meals:

[Manage your trip](#)

## Your purchase

**Amy Nisbett**

Join the AAdvantage® Program

New ticket (0012175757331) \$264.48  
[\$231.98 + Taxes & carrier-imposed fees \$32.50]

---

**Total cost** \$264.48

## Your payment

Visa (ending 2740 ) \$264.48

---

**Total paid** \$264.48

## Bag information

### Checked Bag (Airport)

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

### Checked Bag (Online\*)

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  
Bag fees apply at each Check-in location. Additional allowances and/or discounts may apply.  
For information regarding American Airlines checked baggage policies, please visit: 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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**Personal item** A small purse, briefcase, laptop bag, or similar item that must fit under the seat in front of you.

---

**Carry-on** Maximum dimensions must not to exceed: 22" long x 14" wide x 9" tall (56 x 35 x 23 cm).



**Kesha Jackson**

---

**From:** Delta Air Lines <DeltaAirLines@t.delta.com>  
**Sent:** Thursday, September 12, 2024 10:11 AM  
**To:** Kesha Jackson  
**Subject:** Your Flight Receipt - JAMIE BALLARD 21NOV24

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**DELTA**

**Confirmation Number**

---

HM7SBB

# YOU FOR CHOOSING DELTA E YOU ON BOARD



You're all set. If your plans change, you can make adjustments or cancel your itinerary on MyTrips on the Fly Delta app or [delta.com](https://delta.com) before your flight departs.

Have a great trip, and thank you for choosing Delta.

## Passenger Info

Name: JAMIE BALLARD

FLIGHT	SEAT
DELTA 737	28E
DELTA 3180	22D

Visit [delta.com](http://delta.com) or download the Fly Delta app to view, select or change your seat. If you purchased a Delta Comfort+™ seat or a Trip Extra, please visit My Trips to access a receipt of your purchase.

Thu, 21NOV	DEPART	ARRIVE
DELTA 737 Main Cabin (X)	WASHINGTON- REAGAN 1:59pm	ATLANTA 4:01pm
DELTA 3180 Main Cabin (X)	ATLANTA 6:13pm	JACKSON, MS 6:38pm

**MANAGE MY TRIP**

## Flight Receipt

Ticket #: 0062267061437

Place of Issue:

Issue Date: 12SEP24

Expiration Date: 12SEP25

METHOD OF PAYMENT	
VI*****2740	\$228.98 USD

CHARGES	
<b>Air Transportation Charges</b>	
Base Fare	\$190.12 USD
<b>Taxes, Fees and Charges</b>	
United States - September 11th Security Fee(Passenger Civil Aviation Security Service Fee) (AY)	\$5.60 USD
United States - Transportation Tax (US)	\$14.26 USD
United States - Passenger Facility Charge (XF)	\$9.00 USD
United States - Flight Segment Tax (ZP)	\$10.00 USD
<b>TICKET AMOUNT</b>	<b>\$228.98 USD</b>

### Checked Bag Allowance

The fees below are based on your original ticket purchase. Fees may be converted to local currency based on your departure airport. **If you qualify for free or discounted checked baggage**, this will be taken into account when you check in. Visit [delta.com](http://delta.com) for details on baggage embargoes that may apply to your itinerary.

Thu 21 Nov 2024	DCA-JAN	
CARRY ON	FIRST	SECOND
FREE	\$35.00 <sup>USD</sup> (50LBS/23KG) OR 3,500 miles	\$45.00 <sup>USD</sup> (50LBS/23KG) OR 4,500 miles

**Kesha Jackson**

---

**From:** Delta Air Lines <DeltaAirLines@t.delta.com>  
**Sent:** Thursday, September 12, 2024 10:06 AM  
**To:** Kesha Jackson  
**Subject:** Your Flight Receipt - AMY DAVENPORT NISBETT 21NOV24

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**DELTA**

**Confirmation Number**

---

**HMXUHJ**

# YOU FOR CHOOSING DELTA WE'VE GOT YOU ON BOARD



You're all set. If your plans change, you can make adjustments or cancel your itinerary on MyTrips on the Fly Delta app or [delta.com](https://delta.com) before your flight departs.

Have a great trip, and thank you for choosing Delta.

## Passenger Info

Name: AMY DAVENPORT NISBETT

FLIGHT	SEAT
DELTA 737	28F
DELTA 3180	22E

Visit [delta.com](http://delta.com) or download the Fly Delta app to view, select or change your seat. If you purchased a Delta Comfort+™ seat or a Trip Extra, please visit My Trips to access a receipt of your purchase.

Thu, 21NOV	DEPART	ARRIVE
DELTA 737 Main Cabin (X)	WASHINGTON- REAGAN 1:59pm	ATLANTA 4:01pm
DELTA 3180 Main Cabin (X)	ATLANTA 6:13pm	JACKSON, MS 6:38pm

**MANAGE MY TRIP**

## Flight Receipt

Ticket #: 0062267289269

Place of Issue:

Issue Date: 12SEP24

Expiration Date: 12SEP25

METHOD OF PAYMENT	
VI*****2740	\$228.98 USD

CHARGES	
<b>Air Transportation Charges</b>	
Base Fare	\$190.12 USD
<b>Taxes, Fees and Charges</b>	
United States - September 11th Security Fee(Passenger Civil Aviation Security Service Fee) (AY)	\$5.60 USD
United States - Transportation Tax (US)	\$14.26 USD
United States - Passenger Facility Charge (XF)	\$9.00 USD
United States - Flight Segment Tax (ZP)	\$10.00 USD
<b>TICKET AMOUNT</b>	<b>\$228.98 USD</b>



### Checked Bag Allowance

The fees below are based on your original ticket purchase. Fees may be converted to local currency based on your departure airport. **If you qualify for free or discounted checked baggage**, this will be taken into account when you check in. Visit [delta.com](http://delta.com) for details on baggage embargoes that may apply to your itinerary.

Thu 21 Nov 2024	DCA-JAN	
CARRY ON	FIRST	SECOND
FREE	\$35.00 <sup>USD</sup> (50LBS/23KG) OR 3,500 miles	\$45.00 <sup>USD</sup> (50LBS/23KG) OR 4,500 miles





09/20/2024  
 15:48:37  
 CI: ASHIRLEY  
 CO: LRUSH

PAUL GRIFFIN

Wing/Room AA 3107

1010 SULPHUR SPRINGS RD

No Party 2  
 Fol ID 455113348850  
 Page 1 08/10/2024 09:14:00  
 Arrival 08/08/2024  
 Departure 08/10/2024  
 Bill code RST16  
 Group S08CBC4

CAMEDEN MS39045

THANK YOU FOR CHOOSING HORSESHOE CASINO & HOTEL

DATE	REFERENCE	DESCRIPTION	\$ CHARGES	CREDITS	\$ BALANCE
08/08/2024	455113348848	RESORT FEE \$18.69 DAILY			
08/08/2024	455113356356	RESORT FEE RESORT FEE	18.69		18.69
08/08/2024	455119000333	ROOM CHARGE AA 3107 TAX2	139.00 13.90		171.59
08/09/2024	455123383252	RESORT FEE RESORT FEE	18.69		190.28
08/09/2024	455129000370	ROOM CHARGE AA 3107 TAX2	139.00 13.90		343.18
08/10/2024	455133394456	FRONT DESK VISA *****2740		343.18	
09/12/2024	455464128572	L1 ROOM CHARGE TAX EXEMPT		27.80	-27.80
09/12/2024	455464128575	FRONT DESK VISA *****2740	27.80		
		SUMMARY OF CHARGES			
		ROOM	311.98		
		TAX2	3.40		
		Balance Due		.00	

*Handwritten signature: H. Griffin*

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09/12/2024  
 16:10:02  
 CI: LREED  
 CO: LREED

MIKE ESPY

Wing/Room AA 2136

124 CHERRY LAUREL CIRCLE

No Party 2

RIDGELAND MS39157

Fol ID 455113352452

Page 1 08/10/2024 11:57:00

Arrival 08/08/2024

Departure 08/10/2024

Bill code RST16

Group S08CBC4

THANK YOU FOR CHOOSING HORSESHOE CASINO & HOTEL

DATE	REFERENCE	DESCRIPTION	\$ CHARGES	CREDITS	\$ BALANCE
08/08/2024	455113352450	RESORT FEE \$18.69 DAILY			
08/08/2024	455113356261	RESORT FEE RESORT FEE	18.69		18.69
08/08/2024	455119000277	ROOM CHARGE AA 2136 TAX2	139.00 13.90		171.59
08/09/2024	455123383146	RESORT FEE RESORT FEE	18.69		190.28
08/09/2024	455129000315	ROOM CHARGE AA 2136 TAX2	139.00 13.90		343.18
08/10/2024	455133395119	FRONT DESK AMX *****7004		343.18	
08/10/2024	455133396378	FRONT DESK AMX *****7004		6.00	-6.00
08/10/2024	455133396380	OTHER HOTEL CHARGES FIJI X1	6.00		
09/12/2024	455464128553	L1 ROOM CHARGE TAX EXEMP//LS		27.80	-27.80
09/12/2024	455464128557	FRONT DESK AMX *****7004	343.18		315.38
09/12/2024	455464128559	FRONT DESK VISA *****2740		315.38	
		SUMMARY OF CHARGES			
		ROOM	311.98		

MISC INT	6.00
TAX2	3.40
Balance Due	.00

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Thank you for staying with us! We truly appreciate your patronage. Visit [www.Caesars.com/myrewards](http://www.Caesars.com/myrewards) to book your next trip! Share your experience on TripAdvisor! [www.tripadvisor.com/Rateit-Caesars](http://www.tripadvisor.com/Rateit-Caesars)



09/12/2024  
 16:07:32  
 CI: CMCKAY  
 CO: CMCKAY

KARL M. BANKS

Wing/Room AA 2202

319 W NORTH ST

No Party 2

CANTON MS39046

Fol ID 455113352696

Page 1 08/10/2024 13:21:00

Arrival 08/08/2024

Departure 08/10/2024

Bill code RST16

Group S08CBC4

THANK YOU FOR CHOOSING HORSESHOE CASINO & HOTEL

DATE	REFERENCE	DESCRIPTION	\$ CHARGES	CREDITS	\$ BALANCE
08/08/2024	455113352694	RESORT FEE \$18.69 DAILY			
08/08/2024	455113356085	RESORT FEE RESORT FEE	18.69		18.69
08/08/2024	455119000321	ROOM CHARGE AA 2202 TAX2	139.00 13.90		171.59
08/09/2024	455123382956	RESORT FEE RESORT FEE	18.69		190.28
08/09/2024	455129000359	ROOM CHARGE AA 2202 TAX2	139.00 13.90		343.18
08/10/2024	455133396558	FRONT DESK AMX *****3009		343.18	
09/12/2024	455464128520	FRONT DESK VISA *****2740		315.38	-315.38
		SUMMARY OF CHARGES			
		ROOM	311.98		
		TAX2	31.20		
		Balance Due			-315.38

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Thank you for staying with us! We truly appreciate your patronage. Visit



Hampton Inn and Suites by Hilton - Natchez, MS  
 627 S Canal St, Natchez 39120 US  
 6014466770  
 NATCZ\_Hampton\_Suites@Hilton.com

Date Range: Sep 18, 2024 - Oct 15, 2024  
 Tax#/ID# :

### Guest Folio

Confirmation Number - 90321221

#### Primary Guest

Guest Name: Staford, Steven  
 Address: 627 south canal  
 City, State, Zip Code: Church Hill MS 39120  
 Country: US

#### Stay Details

Check In Date: Sep 18, 2024  
 Check Out Date: Sep 20, 2024  
 Room: 1KNG STUDIO SOFABED NOSMOK  
 Source: OWN HOTEL  
 Guests: 1/0

#### Company Details

Name  
 Tax#/ID#  
 PO Number  
 Account Name

#### Other Details

Bill Number  
 Tax/Fee: YES  
 Exemption  
 Tax/Fee: Sep 18, 2024  
 Exempt Date  
**Travel Agent**  
 IATA  
 Name

Date	Type	Description	Amount
Sep 18, 2024	Charge	NO SHOW ROOM REVENUE-Tax Exempted	\$150.00
Sep 18, 2024	Payments	VISA-2740	-\$150.00

Summary		Amount
Type		
NO SHOW ROOM REVENUE		\$150.00
CREDIT CARD		\$150.00
<b>Folio Balance</b>		<b>\$0.00</b>



59

10-15-24

<b>Adrian Anderson</b> <b>197 Traceland Drive</b> <b>Madison MS 39110</b> <b>United States</b>	Folio No. :	113370	Room No. :	101
	A/R Number :		Arrival :	09-17-24
	Group Code :		Departure :	09-18-24
	Company :	MADCP Convention	Conf. No. :	67113257
	Membership No. :		Rate Code :	IGCOR
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-17-24	*Accommodation	160.00	
09-17-24	State Tax	11.20	
09-17-24	Lodging Tax	4.80	
09-17-24	Occupancy Tax	2.00	
09-18-24	Visa XXXXXXXXXXXXXXX2740		178.00
<b>Total</b>		<b>178.00</b>	<b>178.00</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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.



59

10-15-24

<b>Deanna Germany</b> <b>312 Woodrun Drive</b> <b>Ridgeland MS 39157</b> <b>United States</b>	Folio No. :	113372	Room No. :	104
	A/R Number :		Arrival :	09-17-24
	Group Code :		Departure :	09-18-24
	Company :	MADCP Convention	Conf. No. :	20286604
	Membership No. :		Rate Code :	IGCOR
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-17-24	Gift Shop Post It No.3362447	3.50	
09-17-24	*Accommodation	160.00	
09-17-24	State Tax	11.20	
09-17-24	Lodging Tax	4.80	
09-17-24	Occupancy Tax	2.00	
09-18-24	Visa XXXXXXXXXXXXXXX2740		181.50
<b>Total</b>		<b>181.50</b>	<b>181.50</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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.



59

10-15-24

<b>Kandi Gray</b> <b>296 Goodman Road</b> <b>Pelahatchie MS 39145</b> <b>United States</b>	Folio No. :	113371	Room No. :	102
	A/R Number :		Arrival :	09-17-24
	Group Code :		Departure :	09-18-24
	Company :	MADCP Convention	Conf. No. :	48566588
	Membership No. :		Rate Code :	IGCOR
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-17-24	*Accommodation	160.00	
09-17-24	State Tax	11.20	
09-17-24	Lodging Tax	4.80	
09-17-24	Occupancy Tax	2.00	
09-18-24	Visa XXXXXXXXXXXXXXX2740		178.00
<b>Total</b>		<b>178.00</b>	<b>178.00</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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.





94

09-20-24

<b>Matt Herr</b> <b>United States</b>	Folio No. :	<b>113416</b>	Room No. :	<b>202</b>
	A/R Number :		Arrival :	<b>09-18-24</b>
	Group Code :	<b>MDT</b>	Departure :	<b>09-20-24</b>
	Company :	<b>MDT</b>	Conf. No. :	<b>64801614</b>
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	<b>1 of 1</b>

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXX2740		301.00
09-20-24	State Tax -Adj	-18.90	
09-20-24	Lodging Tax -Adj	-8.10	
09-20-24	Occupancy Tax -Adj	-4.00	
09-20-24	Visa <del>XXXXXXXXXX</del> XXXX2740		-31.00
<b>Total</b>		<b>270.00</b>	<b>270.00</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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.



94

09-20-24

<b>Jacqline Wright United States</b>	Folio No. :	<b>113420</b>	Room No. :	<b>313</b>
	A/R Number :		Arrival :	<b>09-18-24</b>
	Group Code :	<b>MDT</b>	Departure :	<b>09-20-24</b>
	Company :	<b>MDT</b>	Conf. No. :	<b>89074372</b>
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	<b>1 of 1</b>

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXX2740		301.00
09-20-24	State Tax -Adj	-18.90	
09-20-24	Lodging Tax -Adj	-8.10	
09-20-24	Occupancy Tax -Adj	-4.00	
09-20-24	Visa <del>Tax Exempt</del> XXXXXXXXXXXXX2740		-31.00
<b>Total</b>		<b>270.00</b>	<b>270.00</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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.



69

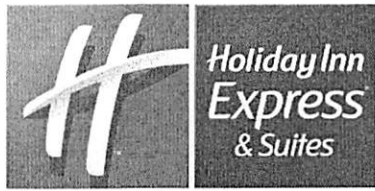
09-20-24

<b>Jacqline Wright United States</b>	Folio No. :	<b>113420</b>	Room No. :	<b>313</b>
	A/R Number :		Arrival :	<b>09-18-24</b>
	Group Code :	<b>MDT</b>	Departure :	<b>09-20-24</b>
	Company :	<b>MDT</b>	Conf. No. :	<b>89074372</b>
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	<b>1 of 1</b>

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXX2740		301.00
<b>Total</b>		<b>301.00</b>	<b>301.00</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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.



69

09-20-24

<b>Matt Herr</b> <b>United States</b>	Folio No. :	<b>113416</b>	Room No. :	<b>202</b>
	A/R Number :		Arrival :	<b>09-18-24</b>
	Group Code :	<b>MDT</b>	Departure :	<b>09-20-24</b>
	Company :	<b>MDT</b>	Conf. No. :	<b>64801614</b>
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	<b>1 of 1</b>

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXX2740		301.00
<b>Total</b>		<b>301.00</b>	<b>301.00</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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.



<b>Deanna Germany</b> <b>312 Woodrun Drive</b> <b>Ridgeland MS 39157</b> <b>United States</b>	Folio No. :	113425	Room No. :	104
	A/R Number :		Arrival :	09-18-24
	Group Code :	MDT	Departure :	09-20-24
	Company :	MDT	Conf. No. :	67050232
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXXXX2740		301.00
<b>Total</b>		<b>301.00</b>	<b>301.00</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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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10-15-24

<b>Kandi Gray</b> <b>296 Goodman Road</b> <b>Pelahatchie MS 39145</b> <b>United States</b>	Folio No. :	113439	Room No. :	102
	A/R Number :		Arrival :	09-18-24
	Group Code :	MDT	Departure :	09-20-24
	Company :	MDT	Conf. No. :	67692575
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXX2740		301.00
<b>Total</b>		<b>301.00</b>	<b>301.00</b>
<b>Balance</b>		<b>0.00</b>	

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

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10-15-24

<b>Adrian Anderson</b> <b>197 Traceland Drive</b> <b>Madison MS 39110</b> <b>United States</b>	Folio No. :	113452	Room No. :	101
	A/R Number :		Arrival :	09-18-24
	Group Code :	MDT	Departure :	09-20-24
	Company :	MDT	Conf. No. :	29398577
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXXXX2740		301.00
<b>Total</b>		<b>301.00</b>	<b>301.00</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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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10-15-24

<b>Jeffery Hunter</b> <b>United States</b>	Folio No. :	113450	Room No. :	422
	A/R Number :		Arrival :	09-18-24
	Group Code :	MDT	Departure :	09-20-24
	Company :	MDT	Conf. No. :	85523306
	Membership No. :		Rate Code :	IGCOR
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXXXX2740		301.00
<b>Total</b>		<b>301.00</b>	<b>301.00</b>
<b>Balance</b>		<b>0.00</b>	

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

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69

10-15-24

<b>Jacque Purnell</b> <b>United States</b>	Folio No. :	113428	Room No. :	121
	A/R Number :		Arrival :	09-18-24
	Group Code :	MDT	Departure :	09-20-24
	Company :	MDT	Conf. No. :	61881924
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXXXX2740		301.00
<b>Total</b>		<b>301.00</b>	<b>301.00</b>
<b>Balance</b>		<b>0.00</b>	

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

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10-15-24

<b>Jered Tomlinson</b> <b>United States</b>	Folio No. :	113451	Room No. :	123
	A/R Number :		Arrival :	09-18-24
	Group Code :	MDT	Departure :	09-20-24
	Company :	MDT	Conf. No. :	28803819
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	Gift Shop Post It No.3362859	3.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXX2740		304.00
<b>Total</b>		<b>304.00</b>	<b>304.00</b>
<b>Balance</b>		<b>0.00</b>	

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

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Hampton Inn and Suites by Hilton - Natchez, MS  
 627 S Canal St, Natchez 39120 US  
 6014466770  
 NATCZ\_Hampton\_Suites@Hilton.com

Date Range: Sep 18, 2024 - Oct 15, 2024  
 Tax#/ID# :

### Guest Folio

Confirmation Number - 95487716

#### Primary Guest

Guest Name	Oneal, Stacey
Address	627 south canal street
City, State, Zip Code	Church Hill MS 39120
Country	US

#### Stay Details

Check In Date	Sep 18, 2024
Check Out Date	Sep 20, 2024
Room	SXQL - 312
Source	OWN HOTEL
Guests	1/0

#### Company Details

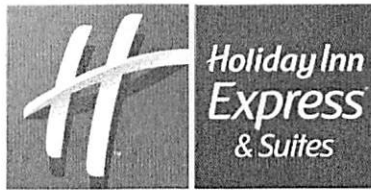
Name
Tax#/ID#
PO Number
Account Name

#### Other Details

Bill Number	
Tax/Fee	YES
Exemption	
Tax/Fee	Sep 18, 2024
Exempt Date	
<b>Travel Agent</b>	
IATA	
Name	

Date	Type	Description	Amount
Sep 18, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 19, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 20, 2024	Payments	VISA-2740	-\$300.00

Summary	
Type	Amount
GUEST ROOM	\$300.00
CREDIT CARD	\$300.00
<b>Folio Balance</b>	<b>\$0.00</b>



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10-15-24

<b>Jeff Adair</b> <b>United States</b>	Folio No. :	113426	Room No. :	201
	A/R Number :		Arrival :	09-18-24
	Group Code :	MDT	Departure :	09-20-24
	Company :	MDT	Conf. No. :	85260252
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-18-24	*Accommodation	135.00	
09-18-24	State Tax	9.45	
09-18-24	Lodging Tax	4.05	
09-18-24	Occupancy Tax	2.00	
09-19-24	*Accommodation	135.00	
09-19-24	State Tax	9.45	
09-19-24	Lodging Tax	4.05	
09-19-24	Occupancy Tax	2.00	
09-20-24	Visa XXXXXXXXXXXXXXX2740		301.00
<b>Total</b>		<b>301.00</b>	<b>301.00</b>
<b>Balance</b>		<b>0.00</b>	

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

I have received the goods and / or services in the amount shown heron. 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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Date Range: Sep 18, 2024 - Oct 15, 2024  
 Tax#/ID# :

### Guest Folio

Confirmation Number - 93726403

#### Primary Guest

Guest Name Spivey, Danny  
 Address x  
 City, State, Zip Code Hattiesburg MS 39406  
 Country US

#### Stay Details

Check In Date Sep 18, 2024  
 Check Out Date Sep 20, 2024  
 Room SXQL - 307  
 Source OWN HOTEL  
 Guests 1/0

#### Company Details

Name  
 Tax#/ID#  
 PO Number  
 Account Name Madison County Board of Supervisors  
 Account Number x

#### Other Details

Bill Number  
 Tax/Fee YES  
 Exemption  
 Tax/Fee Sep 18, 2024  
 Exempt Date  
**Travel Agent**  
 IATA  
 Name

Date	Type	Description	Amount
Sep 18, 2024	Charge	GUEST ROOM-Tax Exempted	\$199.00
Sep 19, 2024	Charge	GUEST ROOM-Tax Exempted	\$199.00
Sep 20, 2024	Payments	VISA-2740	-\$398.00

Summary	
Type	Amount
GUEST ROOM	\$398.00
CREDIT CARD	\$398.00
<b>Folio Balance</b>	<b>\$0.00</b>



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Date Range: Sep 18, 2024 - Oct 15, 2024  
 Tax#/ID# :

### Guest Folio

Confirmation Number - 84273950

#### Primary Guest

Guest Name Ballard, Jamie  
 Address 627 south canal  
 City, State, Zip Code Church Hill MS 39120  
 Country US

#### Stay Details

Check In Date Sep 18, 2024  
 Check Out Date Sep 20, 2024  
 Room KXTO - 301  
 Source OWN HOTEL  
 Guests 1/0

#### Company Details

Name  
 Tax#/ID#  
 PO Number  
 Account Name drug court  
 Account Number dcc  
 confrence

#### Other Details

Bill Number  
 Tax/Fee YES  
 Exemption  
 Tax/Fee Sep 18, 2024  
 Exempt Date  
**Travel Agent**  
 IATA  
 Name

Date	Type	Description	Amount
Sep 18, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 19, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 20, 2024	Payments	VISA-2740	-\$300.00

#### Summary

Type	Amount
GUEST ROOM	\$300.00
CREDIT CARD	\$300.00
<b>Folio Balance</b>	<b>\$0.00</b>



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Date Range: Sep 18, 2024 - Oct 15, 2024  
 Tax#/ID# :

### Guest Folio

Confirmation Number - 87419742

#### Primary Guest

Guest Name Felton, Lance  
 Address 205 east lane  
 City, State, Zip Code Jackson MS 39209  
 Country US

#### ADDN GUESTS

#### Hilton Honors

Member  
 1551618224

#### Stay Details

Check In Date Sep 18, 2024  
 Check Out Date Sep 20, 2024  
 Room KXTO - 228  
 Source OWN HOTEL  
 Guests 1/0

#### Company Details

Name  
 Tax#/ID#  
 PO Number  
 Account Name drug court  
 Account Number confrence  
 dcc

#### Other Details

Bill Number  
 Tax/Fee YES  
 Exemption  
 Tax/Fee Sep 18, 2024  
 Exempt Date  
**Travel Agent**  
 IATA  
 Name

Date	Type	Description	Amount
Sep 18, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 19, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 20, 2024	Payments	VISA-2740	-\$300.00

#### Summary

Type	Amount
GUEST ROOM	\$300.00
CREDIT CARD	\$300.00
<b>Folio Balance</b>	<b>\$0.00</b>

*Handwritten signature*



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Date Range: Sep 18, 2024 - Oct 15, 2024  
 Tax#/ID# :

### Guest Folio

Confirmation Number - 92350084

#### Primary Guest

Guest Name  
 Address  
 City, State, Zip Code  
 Country

NISBETT, Amy  
 162 Dover Lane  
 Madison MS 39110  
 US

#### ADDN GUESTS

#### Hilton Honors

Silver  
 589287599

#### Stay Details

Check In Date  
 Check Out Date  
 Room  
 Source  
 Guests

Sep 18, 2024  
 Sep 20, 2024  
 SXQL - 310  
 OWN HOTEL  
 1/0

#### Company Details

Name  
 Tax#/ID#  
 PO Number  
 Account Name

#### Other Details

Bill Number  
 Tax/Fee YES  
 Exemption  
 Tax/Fee Sep 18, 2024  
 Exempt Date  
**Travel Agent**  
 IATA  
 Name

Date	Type	Description	Amount
Sep 18, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 19, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 20, 2024	Payments	VISA-2740	-\$300.00

Summary	
Type	Amount
GUEST ROOM	\$300.00
CREDIT CARD	\$300.00
<b>Folio Balance</b>	<b>\$0.00</b>





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 6014466770  
 NATCZ\_Hampton\_Suites@Hilton.com

Date Range: Sep 18, 2024 - Oct 15, 2024  
 Tax#/ID# :

### Guest Folio

Confirmation Number - 93452485

#### Primary Guest

Guest Name Stringer, Avis  
 Address 627 south canal street  
 City, State, Zip Code Church Hill MS 39120  
 Country US

#### Stay Details

Check In Date Sep 18, 2024  
 Check Out Date Sep 20, 2024  
 Room KXTO - 225  
 Source OWN HOTEL  
 Guests 1/0

#### Company Details

Name  
 Tax#/ID#  
 PO Number  
 Account Name

#### Other Details

Bill Number  
 Tax/Fee YES  
 Exemption  
 Tax/Fee Sep 18, 2024  
 Exempt Date  
**Travel Agent**  
 IATA  
 Name

Date	Type	Description	Amount
Sep 18, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 19, 2024	Charge	GUEST ROOM-Tax Exempted	\$150.00
Sep 20, 2024	Payments	VISA-2740	-\$300.00

Summary	
Type	Amount
GUEST ROOM	\$300.00
CREDIT CARD	\$300.00
<b>Folio Balance</b>	<b>\$0.00</b>