




# PURCHASING DEPARTMENT

Madison County Board of Supervisors  
146 West Center Street / Post Office Box 608  
Canton, MS 39046

April 20, 2026

To: Board of Supervisors

From: Kesha Jackson, Purchasing Clerk 

Subject: April 2026 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: 4/1/2026

<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>
BOS CARD/0603	Martina Griffin	airline	3/2/2026	American Airline	\$896.49	meeting
	Barbara Crosswhite	lodging	3/5/2026	Hilton Garden Inn	\$375.00	meeting
	Martina Griffin	lodging	3/7/2026	Planet Hollywood Resort	\$316.33	meeting
	Martina Griffin	lodging	3/10/2026	Planet Hollywood Resort	\$836.74	meeting
	Timothy Bryan	lodging	3/11/2026	Beau Rivage	\$651.84	meeting
	Timothy Bryan	lodging	3/14/2026	Beau Rivage	(\$69.84)	meeting
	Vicky Miller	airline	3/16/2026	Delta Air	\$618.40	meeting
	Minor Norman	lodging	3/18/2026	IP Biloxi Resort	\$96.31	meeting
	Minor Norman	lodging	3/18/2026	IP Biloxi Resort	\$146.99	meeting
	Minor Norman	lodging	3/18/2026	IP Biloxi Resort	\$475.65	meeting
<b>BOS CARD TOTAL</b>					<b>\$4,343.91</b>	
BOS CARD/9949	Abonie Robicheaux	lodging	3/7/2026	IP Casino Resort	(\$107.69)	meeting
<b>BOS CARD TOTAL</b>					<b>(\$107.69)</b>	
SO CARD/7398	Kristen Byrd	lodging	3/25/2026	Holiday Inn Express	\$502.70	meeting
<b>SO CARD TOTAL</b>					<b>\$502.70</b>	
<b>TOTAL TO PAY</b>					<b>\$4,738.92</b>	

Account Number: [REDACTED] 9951  
 Unique ID: XXXX XXXX XXXX 0545  
 MADISON COUNTY BOARD CC  
 Statement Date: 03-31-2026



**Corporate Account Summary**

Previous Balance	\$1,346.59
Purchases and Other Charges	\$4,916.45
Cash Advances	\$0.00
Cash Advance Fees	\$0.00
Late Payment Charges	\$0.00
Credits	\$177.53 CR
Payments	\$1,346.59 PY

<b>New Balance</b>	<b>\$4,738.92</b>
Disputed Amount	\$0.00

**Payment Information**

Amount Due **\$4,738.92**  
 Payment due in accordance with your agreement with U.S. Bank.

QUESTIONS OR TO REPORT A LOST OR STOLEN CARD,  
 CALL CUSTOMER SERVICE 1-800-344-5696

To overnight or courier a payment, please send to:  
 Corporate Payment Systems  
 3180 Rider Trail S, Department 790428  
 Earth City, MO 63045-1518

**Corporate Account Activity**

MADISON COUNTY BOARD CC  
 Account Number: [REDACTED] 9951  
 Unique ID: XXXX XXXX XXXX 0545

Total Corporate Activity  
**\$1,346.59 CR**

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-19	03-19	74798266078607800000512	PAYMENT-THANK YOU Q	1,346.59 PY

**New Activity**

KESHA JACKSON:	Purchases	\$0.00	Total Activity	\$107.69 CR
Account Number: [REDACTED] 9449	Cash Advances	\$0.00		
Unique ID: XXXX XXXX XXXX 1347	Cash Advances Fees	\$0.00		
	Credits	\$107.69 CR		

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-09	03-07	74943006066390566008856	IP CASINO RESORT SPA 6014364555 MS	107.69 CR

(transactions continued on next page)

✕ Payment may be made electronically or by check made payable to Corporate Payment Systems.

CORPORATE PAYMENT SYSTEMS  
 P.O. BOX 6343  
 FARGO, ND 58125-6343

[REDACTED] 73892

Account Number: [REDACTED] 9951  
 Unique ID: XXXX XXXX XXXX 0545  
 Amount Due: \$4,738.92

Amount Enclosed \$ [REDACTED]

If paying by check, include coupon with payment to address below.

CORPORATE PAYMENT SYSTEMS  
 P.O. BOX 790428  
 ST. LOUIS, MO 63179-0428



106481801604394 S 2  
 MADISON COUNTY BOARD CC  
 KESHA JACKSON  
 146 WEST CENTER STREET,  
 2ND FLOOR ADMINISTRATION OFFICE  
 CANTON MS 39046-3735

**New Activity cont**

<b>LEEANN SANDERS</b>	<b>Purchases</b>	<b>\$502.70</b>	<b>Total Activity</b>	<b>\$502.70</b>
Account Number: ██████████ 7398	Cash Advances	\$0.00		
Unique ID: XXXX XXXX XXXX 8891	Cash Advances Fees	\$0.00		
	Credits	\$0.00 CR		

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-27	03-25	24943006085401554643481	HOLIDAY INN EXPRESS STAR 6623240076 MS 0840308516623240076 ARRIVAL:03-22-26	502.70

<b>KESHA JACKSON</b>	<b>Purchases</b>	<b>\$4,419.75</b>	<b>Total Activity</b>	<b>\$4,349.91</b>
Account Number: ██████████ 0803	Cash Advances	\$0.00		
Unique ID: XXXX XXXX XXXX 8701	Cash Advances Fees	\$0.00		
	Credits	\$69.84 CR		

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-03	03-02	24053456062367811035084	AMERICAN AIR0012321484555 FORT WORTH TX GRIFFIN/MARTINA DEPARTURE04-23-26 JAN AA L DFW AA L LASAA K DFW	896.49
03-09	03-05	24692166065109920975508	HILTON GARDEN INN STARKVILLE MS 111274 ARRIVAL:03-02-26	375.00
03-09	03-07	24943006086390513523632	PLANET HW DEP-NOSHW-CXL 866-209-4732 NV 89335368662094732 ARRIVAL:04-23-26	316.33
03-11	03-10	24943006089392179412206	PLANET HW DEP-NOSHW-CXL 866-209-4732 NV 89370578662094732 ARRIVAL:04-23-26	836.74
03-13	03-11	24692166071105256655302	BEAU RIVAGE - ADV DEP 877-880-0880 MS CONCESSIONARRIVAL:03-11-26	651.84
03-16	03-14	74692166074108125011378	BEAU RIVAGE - ADV DEP 877-880-0880 MS CONCESSIONARRIVAL:03-14-26	69.84 CR
03-18	03-16	24717056076870766180674	DELTA AIR 0067473347451 SEATTLE WA MILLER/VICKIE T DEPARTURE04-15-26 JAN DL EATL DL EBDL DL EATL DL E JAN	618.40
03-19	03-18	24943006077396929041843	IP-MS ADV DEPOSIT 6014364555 MS 20855926014364555 ARRIVAL:05-27-26	96.31
03-19	03-18	24943006077396929041900	IP-MS ADV DEPOSIT 6014364555 MS 20856016014364555 ARRIVAL:05-26-26	146.99
03-19	03-18	24943006077396929041918	IP-MS ADV DEPOSIT 6014364555 MS 20856026014364555 ARRIVAL:05-27-26	475.65

(transactions continued on next page)



Page 3 of 4  
MADISON COUNTY BOARD CC  
Account Number : ██████████ 9951  
Unique ID: XXXX XXXX XXXX 0545  
Statement Date : 03-31-2026

New Activity cont			
Department:	00000	Total:	\$4,738.92
Division:	00000	Total:	\$4,738.92

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**Casino • Resort • Spa**  
BILOXI, MISSISSIPPI

Name: ABONIE ROBICHEAUX

Address: 146 WEST CENTER STREET  
P.O. BOX 608  
CANTON MS 39046

IP Casino Resort Spa  
850 Bayview Avenue, Biloxi, MS 39530  
For Reservations Call 1-888-946-2847

Folio ID: 460825202385

Arrival Date: 03/02/2026

Departure Date: 03/06/2026

Room No: IP 1130

Guests: 1

Group Code: PIPE26C

DATE	REFERENCE	DESCRIPTION	CHARGES	CREDITS	BALANCE
03/02/2026	460825202386	APPLIED DEPOSIT *****9449		89.59	
03/02/2026	460825202388	APPLIED DEPOSIT *****9449		406.06	
03/02/2026	460829100043	RESORT FEE	18.19		
03/02/2026	460829100044	\$17 RESORT FEE + TAX RESORT FEE	17.00		
03/02/2026	460829100045	\$17 RESORT FEE NO TA RESORT FEE		18.19	
03/02/2026	460829100508	REVERSAL OF \$17+TX R ROOM CHARGE IP 1130	79.99		
03/03/2026	460839100055	RESORT FEE	18.19		
03/03/2026	460839100056	\$17 RESORT FEE + TAX RESORT FEE	17.00		
03/03/2026	460839100057	\$17 RESORT FEE NO TA RESORT FEE		18.19	
03/03/2026	460839101302	REVERSAL OF \$17+TX R ROOM CHARGE IP 1130	79.99		
03/04/2026	460849100054	RESORT FEE	18.19		
03/04/2026	460849100055	\$17 RESORT FEE + TAX RESORT FEE	17.00		
03/04/2026	460849100056	\$17 RESORT FEE NO TA RESORT FEE		18.19	
03/04/2026	460849100573	REVERSAL OF \$17+TX R ROOM CHARGE IP 1130	79.99		
03/05/2026	460859100043	RESORT FEE	18.19		
03/05/2026	460859100044	\$17 RESORT FEE + TAX RESORT FEE	17.00		

I agree that my liability is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of the full amount of these charges.

GUEST SIGNATURE:

Balance Due:



Take the Games With You





Casino • Resort • Spa  
BILOXI, MISSISSIPPI

Name: ABONIE ROBICHEAUX

Address: 146 WEST CENTER STREET  
P.O. BOX 608  
CANTON MS 39046

IP Casino Resort Spa  
850 Bayview Avenue, Biloxi, MS 39530  
For Reservations Call 1-888-946-2847

Folio ID: 460825202385

Arrival Date: 03/02/2026

Departure Date: 03/06/2026

Room No: IP 1130

Guests: 1

Group Code: PIPE26C

DATE	REFERENCE	DESCRIPTION	CHARGES	CREDITS	BALANCE
03/05/2026	460859100045	\$17 RESORT FEE NO TA RESORT FEE		18.19	
03/05/2026	460859100540	REVERSAL OF \$17+TX R ROOM CHARGE IP 1130	79.99		
03/06/2026	460865489450	FRONT DESK VISA *****9449	107.69		
SUMMARY OF CHARGES					
		ROOM	387.96		

I agree that my liability is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of the full amount of these charges.

GUEST SIGNATURE: \_\_\_\_\_

Balance Due: .00




Take the Games With You



Issued: March 2, 2026

# 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 

**Thursday, April 23, 2026**

**JAN** AA 5286  
Jackson Operated by PSA Airlines  
11:34 AM as American Eagle

**DFW** Seat: 18F  
Dallas/Fort Worth Class: Economy (L)  
1:20 PM Meals:

**DFW** AA 2864  
Dallas/Fort Worth

**LAS** Seat: 24A  
Las Vegas Class: Economy (L)  
3:57 PM Meals: Refreshment

**Monday, April 27, 2026**

[Manage your trip](#)

Confirmation code

✈

**LAS**

AA 777

Las Vegas

2:48 PM

○

**DFW**

Seat: 20F

Dallas/Fort Worth

Class: **Economy (K)**

7:46 PM

Meals: **Refreshment**

✈

**DFW**

AA 5089

Dallas/Fort Worth

Operated by PSA Airlines  
as American Eagle

9:25 PM

○

**JAN**

Seat: 18A

Jackson

Class: **Economy (K)**

10:57 PM

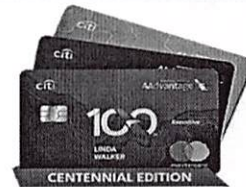
Meals:

Manage your trip

Limited time: Earn up to  
**100,000 bonus miles\***

Find the Citi® / AAdvantage® card that's  
right for you. Terms apply.

[Learn more](#)



## Your purchase

**Martina Griffin**

Join the AAdvantage® Program

New ticket

\$896.49

[\$787.06 + Taxes & carrier-imposed fees

\$109.43]

**Total cost**

**\$896.49**

## Your payment

Visa (ending 0603 )

\$896.49

**Total paid**

**\$896.49**



## Bag information

### Checked Bag (Airport)

1<sup>st</sup> bag \$40.00

2<sup>nd</sup> bag \$50.00

### Checked Bag (Online\*)

1<sup>st</sup> bag \$35.00

2<sup>nd</sup> bag \$45.00

Taxes are included, when applicable.

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 2 hours) before departure.

### Carry-on bags (American Airlines operated flights)

**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).





Hilton Garden Inn - Starkville, MS  
 975 MS-12, Starkville 39759  
 MS US  
 6626159664  
 STFSV\_GM@Hilton.com

Date Range: 2026-03-02 - 2026-04-14  
 Tax#/ID# :

### Guest Folio

Confirmation Number - 3411127441

#### Primary Guest

Guest Name	Crosswhite, Barbara
Address	229 North Union St
City, State, Zip Code	Canton MS 39046
Country	US

#### Stay Details

Check In Date	Mar 02, 2026
Check Out Date	Mar 05, 2026
Room	K1RZ - 525
Source	OWN HOTEL
Guests	1/0

#### Company Details

Name
Tax#/ID#
PO Number
Account Name

#### Other Details

Tax Invoice	
Tax/Fee	YES
Exemption	
Tax/Fee	Mar 02, 2026
Exempt Date	
<b>Travel Agent</b>	
IATA	
Name	

Date	Type	Description	Amount
Mar 02, 2026	Charge	GUEST ROOM-Tax Exempted	\$125.00
Mar 03, 2026	Charge	GUEST ROOM-Tax Exempted	\$125.00
Mar 04, 2026	Charge	GUEST ROOM-Tax Exempted	\$125.00
Mar 05, 2026	Payments	VISA-0603	(\$375.00)

#### Summary

Type	Amount
CREDIT CARD	(\$375.00)
GUEST ROOM	\$375.00
<b>Folio Balance</b>	<b>\$0.00</b>

# RESERVATION CONFIRMATION

**Dear Martina,**

Thank you for choosing Planet Hollywood Resort & Casino Las Vegas. Please contact us should you have any questions or if you would like further assistance with your upcoming visit.

**CONFIRMATION  
NUMBER**

**NJNTY**

[MANAGE ITINERARY](#)

[EXPLORE LAS VEGAS](#)

## TRIP SUMMARY

### Planet Hollywood Resort & Casino Las Vegas

3667 LAS VEGAS BLVD. SO.  
Las Vegas, NV 89109  
702-785-5555

---

Guest Name: Martina Griffin  
Room Type: RUN OF HOUSE  
Check In Date: 04/23/2026  
Check Out Date: 04/27/2026  
Number of Rooms: 1  
Adults: 1  
Children: 0

---

Subtotal: \$738.00  
Resort/Other Fees: \$219.80  
Taxes: \$128.14  
Deposit Received: \$316.33  
Room Total: \$1085.94

---

Name on Card: Martina Griffin  
Card Number: xxxx-xxxx-xxxx-xxxx

For questions or changes regarding your reservation, please contact Caesars Entertainment at 1-866-503-5494 from 6am to 12am PT, 7 days a week.

**GRAND TOTAL: \$1085.94**

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

CCREVG		04/14/2026		PH RESORT AND CASINO		08:28 AM		CCREVGW				
Guest Credit Card Transaction Review												
GRIFFIN, MARTINA								Arrive: 04/23/2026		Depart: 04/27/2026		
X=Reprint Receipt				V=Void Authorization								
Sls	Stl	Exp	Entry	Trans								
Dft	Action	Resp	Mth	Credit Card	Date	Type	Amount	Auth Code	Invoice	User	Trans Date	Time
	Auth	Approve	RVS	447448*****0603	1128	Keyed	316.33	013245	8933536	QZRCRVS	03/06/2026	12:32 PM
	Settle		RVS	447448*****0603	1128	Keyed	316.33	013265	8933536	QZRCRVS	03/06/2026	12:32 PM
	Auth	Approve	RVS	447448*****0603	1128	Keyed	836.74	046287	8937057	LV2CCOLLIN	03/09/2026	08:25 AM
	Settle		RVS	447448*****0603	1128	Keyed	836.74	046287	8937057	LV2CCOLLIN	03/09/2026	08:25 AM



Erika Stokes | E-Communications Specialist  
 O 1.866.209.4732 | F 702.967.3820  
 3645 Las Vegas Blvd South | Las Vegas, NV 89109  
 Caesars | Harrah's | Horseshoe  
[www.caesars.com](http://www.caesars.com)

*Handwritten signature*

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**Fw: Payment Confirmation for Your Reservation at MGM Resorts**

---

From Kesha Jackson <Kesha.Jackson@madison-co.com>  
Date Wed 3/11/2026 10:54 AM  
To Kesha Jackson <Kesha.Jackson@madison-co.com>

**Kesha Jackson**

MADISON COUNTY BOARD OF SUPERVISORS  
Administrative Assistant & Purchasing Clerk  
146 West Center Street  
P.O. Box 608  
Canton, MS 39046  
(601) 855-5534 (direct)  
(601) 790-2590 (BOS office)  
(601) 859-5875 (fax)



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**From:** MGM Resorts International <no-reply@notification.mgmresorts.com>  
**Sent:** Wednesday, March 11, 2026 10:51 AM  
**To:** Kesha Jackson <Kesha.Jackson@madison-co.com>  
**Subject:** Payment Confirmation for Your Reservation at MGM Resorts

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



## Your payment is confirmed

Hi Timothy Bryan

Congratulations! Here's your payment details.

For your convenience, your payment receipt is below.



Beau Rivage

---

2026-03-11 08:48 PST

Category

Group Individual Attendee Reservation

Type

Credit Card

---

Summary

Reservation confirmation number	Approval Code	Amount
982020110	097005	\$651.84

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Amount Paid \$651.84

Payment details

Deposit Amount	\$651.84
Convenience fee	\$0.00
Total	\$651.84
Payment method	Visa ending in 0603



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Transaction Id	35954
Cardholder name	Madison Co BOS 1
Cardholder address	P.O. Box 608, Canton, MS, 39046, US
Cardholder e-mail	kesha.jackson@madison-co.com

Beau Rivage  
, 875 Beach Blvd, Biloxi, MS 39530  
888.567.6667

[Privacy policy](#) | [Mgmresorts.com](#)

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RESORT & CASINO • BILOXI

Timothy Bryan  
Po Box 608, Canton, MS, US, 39046

Conf No. 982020110  
Arrival 2026-04-12  
Departure 2026-04-15

DATE	DESCRIPTION	CHARGES	CREDITS
2026-04-12	Deposit Applied		651.84
2026-04-12	Deposit Applied		-69.84
2026-04-12	Room Rate	179.00	
2026-04-12	Resort Fee	15.00	
2026-04-13	Room Rate	179.00	
2026-04-13	Resort Fee	15.00	
2026-04-14	Room Rate	179.00	
2026-04-14	Resort Fee	15.00	
	Total	582.00 -	582.00
	Balance	0.00	

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**Fw: Expedia flight purchase confirmation - Hartford, CT, United States (BDL-Bradley Intl.) - Wed, Apr 15 - (Itinerary # 73397982398219)**

---

From Kesha Jackson <Kesha.Jackson@madison-co.com>  
Date Tue 4/14/2026 10:48 AM  
To Kesha Jackson <Kesha.Jackson@madison-co.com>

**Kesha M. Jackson**

MADISON COUNTY BOARD OF SUPERVISORS  
County Administrative Assistant & Purchase Clerk  
146 West Center Street  
P.O. Box 608  
Canton, MS 39046  
(601) 855-5534 (Direct)  
(601) 790-2590 (BOS Office)  
(601) 859-5875 (Fax)



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**From:** Expedia.com <expedia@eg.expedia.com>  
**Sent:** Monday, March 16, 2026 3:55 PM  
**To:** Kesha Jackson <Kesha.Jackson@madison-co.com>  
**Subject:** Expedia flight purchase confirmation - Hartford, CT, United States (BDL-Bradley Intl.) - Wed, Apr 15 - (Itinerary # 73397982398219)

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

 **Expedia**


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## Itinerary #

[View full itinerary](#)

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### Jackson to Hartford

 Delta 3183  
Confirmation:   
Fare type: Economy / Coach  
1h 23m flight


 Departure	Arrival
7:15am	9:38am
Wed, Apr 15 Jackson, MS (JAN-Evers Intl.)	Wed, Apr 15 Atlanta, GA (ATL-Hartsfield-Jackson Atlanta Intl.)

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Layover: 1h 24m in Atlanta


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 Delta 1082  
2h 14m flight

 Departure	Arrival
11:02am	1:16pm
Wed, Apr 15 Atlanta, GA (ATL-Hartsfield-Jackson Atlanta Intl.)	Wed, Apr 15 Hartford, CT (BDL-Bradley Intl.)

**Free cancellation expires 24 hours after confirmation**

### Hartford to Jackson

 Delta 1082  
Confirmation:   
Fare type: Economy / Coach  
2h 33m flight

 Departure	Arrival
2:21pm	4:54pm

Sat, Apr 18  
Hartford, CT (BDL-Bradley Intl.)


Sat, Apr 18  
Atlanta, GA (ATL-Hartsfield-Jackson  
Atlanta Intl.)

---

Layover: 1h 36m in Atlanta

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 Delta 3180  
1h 19m flight

 Departure	Arrival
6:30pm	6:49pm
Sat, Apr 18	Sat, Apr 18
Atlanta, GA (ATL-Hartsfield-Jackson Atlanta Intl.)	Jackson, MS (JAN-Evers Intl.)

[Change or cancel booking](#)

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 **Travel confidently with the Expedia app**

Manage your plans and make trip updates on the fly - wherever the journey takes your. [Explore the app](#)

---

## Traveler details

Vickie Terrell Miller

[View ticket numbers](#)

Use for changes and cancellation, or to check in for international airlines.

### Manage your seats and bags for each flights

<a href="#">ATL to JAN</a>	No seats selected
<a href="#">BDL to ATL</a>	No seats selected
<a href="#">JAN to ATL</a>	No seats selected
<a href="#">ATL to BDL</a>	No seats selected

---

## Price details

1 adult

\$528.37

Taxes and fees \$90.03

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**Total paid** \$618.40

**Total** \$618.40

Unless and otherwise specified, rates are quoted in US dollars.

The total price includes all mandatory taxes and fees.

[View receipt](#)

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## You booked, now bundle!

Add to your Hartford trip to Bundle & Save\*

✓ Flights booked >  
View details

---

 Add a hotel >  
up to \$268 off

---

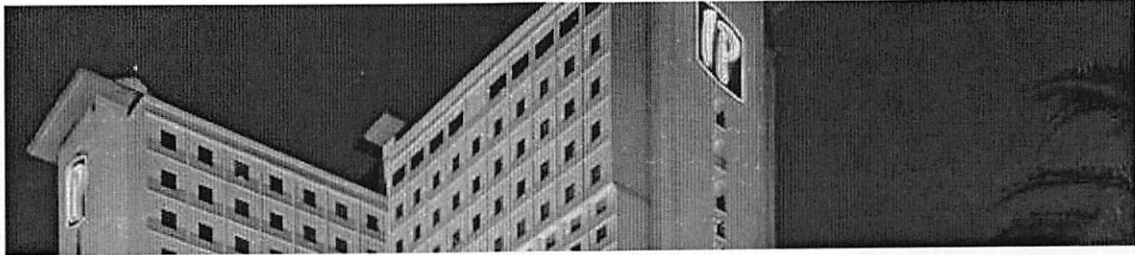
 Add a car >  
up to 30% off

\*Offers valid on select hotels and cars

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## Travel with more peace of mind

Get reimbursed if you need to cancel your flight due to covered illness, delays, and more.



## CONFIRMATION INFORMATION

Dear MINOR NORMAN

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:	MINOR NORMAN
Confirmation Number:	
Arrival Date:	Wednesday, 05/27/2026
Departure Date:	Sunday, 05/31/2026
Check-in Time:	04:00 PM
Check-out Time:	11:00 AM
Number of Nights:	4
Number of Rooms:	1
Room Type:	IP/D2
Room Description:	DLX 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 \$20.33 (tax included) which will be charged at check-in. If tax exempt, please present tax exemption form at check-in. Tax collected will be applied to balance and or refunded.

**Reservation Information**

Stay Total: 511.96

Stay Tax: 61.44

Stay Total w/Tax: 573.40

Deposit Received: 96.31

Date	Rate	Nights
5/27/26	96.31	2
Date	Rate	Nights
5/29/26	190.39	2

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


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Gambling Problem? Call 1-800-GAMBLER

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**IP Casino Receipts**

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From Melissa Allen <MelissaAllen@boydgaming.com>  
Date Tue 4/14/2026 11:02 AM  
To Kesha Jackson <Kesha.Jackson@madison-co.com>

 1 attachment (31 KB)  
SKM\_C650i26041410170.pdf;

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

Good morning,

Attached is the only receipt we can provide at this time, as the reservation has not yet begun. Once the guest has checked out, we will be able to provide a more detailed receipt.

Thank you,

**Melissa Allen** | *Assistant Front Office Manager*

P: 228.546.3030  
850 Bayview Ave | Biloxi, MS 39530  
Hotel



This message may contain information that is confidential. Any forwarding, disclosure, distribution or copying of this communication to any other person is prohibited. If the circumstances indicate that you have received this message in error, or it is reasonably inferable that you were inadvertently or mistakenly included as an addressee, the sender does not waive any privilege to which he or another person is entitled. Also, in that case, please notify the sender by return e-mail and delete this message.

LMDEP01G

Deposit List for NORMAN, MINOR  
As of Tue., 04/14/2026 at 10:58 AM

Page 1

Deposit File Transactions			St1	Token/Card	Incoming	Outgoing	In/Out Data
Date	Deposit ID	Type	Mth				
03/17/2026	460976227551	Rcv	RVS	447448*****0603			

Credit Card File Transactions			St1	Token/Card	Amount	Exp Date	Authorization Code
Date	Credit Card File ID	Type	Mth				
03/17/2026	460971113799	Authorize	RVS	447448*****0603	146.99	11/28	010892
03/17/2026	460971113800	Settle	RVS	447448*****0603		11/28	010892

146.99


16

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**IP Casino Receipts**

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To Kesha Jackson <Kesha.Jackson@madison-co.com>

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LMDEP01G

Deposit List for NORMAN, MINOR  
As of Tue., 04/14/2026 at 10:58 AM

Page 2

Deposit File Transactions			Stl	Token/Card	Incoming	Outgoing	In/Out Data
Date	Deposit ID	Type	Mth				
03/17/2026	460976225978	Rcv	RVS	447448*****0603			
03/17/2026	460976227681	Rcv	RVS	447448*****0603			

Credit Card File Transactions				Stl	Token/Card	Amount	Exp Date	Authorization Code
Date	Credit Card File ID	Type	Mth					
03/17/2026	460971113747	Authorize	RVS	447448*****0603			11/28	041668
03/17/2026	460971113750	Settle	RVS	447448*****0603			11/28	041668
03/17/2026	460971113804	Authorize	RVS	447448*****0603			11/28	074334
03/17/2026	460971113805	Settle	RVS	447448*****0603		475.65	11/28	074334

Account Number : [REDACTED] 7398  
Unique ID: XXXX XXXX XXXX 6891  
LEEANN SANDERS  
Statement Date : 03-31-2026



**Account Summary**

Previous Balance \$0.00  
Purchases and Other Charges \$502.70  
Cash Advances \$0.00  
Cash Advance Fees \$0.00  
Late Payment Charges \$0.00  
Credits \$0.00 CR  
Payments \$0.00 PY

**Total Activity \$502.70**

Disputed Amount \$0.00

**General Information**

Total Activity \$502.70

QUESTIONS OR TO REPORT A LOST OR STOLEN CARD,  
CALL CUSTOMER SERVICE 1-800-344-5896

**New Activity**

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-27	03-25	24943008085401554643481	HOLIDAY INN EXPRESS STAR 6623240076 MS 0840306518823240076 ARRIVAL:03-22-26	502.70

CORPORATE PAYMENT SYSTEMS  
P.O. BOX 8343  
FARGO, ND 58125-8343

Account Number: [REDACTED] 7398  
Unique ID: XXXX XXXX XXXX 6891  
Amount Due: \$0.00

**\*\*MEMO STATEMENT ONLY\*\*  
DO NOT REMIT PAYMENT**



108481801604935 S  
LEEANN SANDERS  
MADISON CO SHERIFF 1  
146 WEST CENTER ST  
P.O. BOX 608  
CANTON MS 39046-0608

Page 2 of 2  
LEANN SANDERS  
Account Number : ██████████ 7398  
Unique ID: XXXX XXXX XXXX 6891  
Statement Date : 03-31-2026

**This area intentionally left blank.**

**NAME:** MCSO - card 1  
**CARD NUMBER:** XXXX 7398  
**BILLING PERIOD:** Mar-26

<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>
3/25/2026	Holiday Inn Express	\$502.70	Kristen Byrd	hotel	001	220	480	Y

**TOTAL** \$502.70

Account Number : ██████████7398  
Unique ID: XXXX XXXX XXXX 6891  
LEEANN SANDERS  
Statement Date : 03-31-2026



**Account Summary**

Previous Balance	\$0.00
Purchases and Other Charges	\$502.70
Cash Advances	\$0.00
Cash Advance Fees	\$0.00
Late Payment Charges	\$0.00
Credits	\$0.00 CR
Payments	\$0.00 PY

**Total Activity** \$802.70

**Disputed Amount** \$0.00

**General Information**

**Total Activity** \$502.70

QUESTIONS OR TO REPORT A LOST OR STOLEN CARD,  
CALL CUSTOMER SERVICE 1-800-344-6896

**New Activity**

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-27	03-25	24943006085401554643481	HOLIDAY INN EXPRESS STAR 6623240076 MS 0840308518623240076 ARRIVAL:03-22-26	502.70

*Trail: 302  
4-13-26*

CORPORATE PAYMENT SYSTEMS  
P.O. BOX 8343  
FARGO, ND 58125-8343

Account Number: ██████████7398  
Unique ID: XXXX XXXX XXXX 6891  
Amount Due: \$0.00

**\*\*MEMO STATEMENT ONLY\*\*  
DO NOT REMIT PAYMENT**

109481801604935 S  
LEEANN SANDERS  
MADISON CO SHERIFF 1  
148 WEST CENTER ST  
P.O. BOX 608  
CANTON MS 39046-0608



14

03-25-26

<b>Kristen Byrd</b> <b>2941 U.S. 51</b> <b>Canton MS 39046</b> <b>United States</b>	Folio No. :	255200	Room No. :	220
	A/R Number :		Arrival :	03-22-26
	Group Code :		Departure :	03-25-26
	Company :		Conf. No. :	46505325
	Membership No. :		Rate Code :	IGCOR
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
03-22-26	*Accommodation	139.00	
03-22-26	State Tax - Room	9.73	
03-22-26	Occupancy Room Tax	2.78	
03-22-26	STARKVILLE PARKS AND RE	1.39	
03-23-26	*Accommodation	159.00	
03-23-26	State Tax - Room	11.13	
03-23-26	Occupancy Room Tax	3.18	
03-23-26	STARKVILLE PARKS AND RE	1.59	
03-24-26	*Accommodation	159.00	
03-24-26	State Tax - Room	11.13	
03-24-26	Occupancy Room Tax	3.18	
03-24-26	STARKVILLE PARKS AND RE	1.59	
03-25-26	Visa XXXXXXXXXXXXX7398		502.70
<b>Total</b>		<b>502.70</b>	<b>502.70</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.

Holiday Inn Express Hotel and Suites Starkville  
 110 B Hwy 12 West  
 Starkville, MS 39759  
 Telephone: (662) 324-0076 Fax: (662) 338-5190