

Purchasing Department
Madison County Board of Supervisors
146 West Center Street
Canton, Mississippi 39046

601-855-5503
hardy@madison-co.com

22 August 2014

District 1 Supervisor John Bell Crosby
District 2 Supervisor Ronny Lott
District 3 Supervisor Gerald Steen
District 4 Supervisor Karl Banks
District 5 Supervisor Paul Griffin

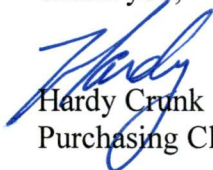
Subject: Place August 2014 SO credit card report on minutes

Gentlemen:

Per statutory requirements, please place the following monthly credit card report and accompanying documentation on the minutes:

Sheriff's Department MasterCard for billing period 11 July 2014 – 10 August 2014.

Thank you,


Hardy Crunk
Purchasing Clerk

SO CREDIT CARD REPORT

CREDIT CARD: MASTERCARD
NUMBER: XXXX XXXX XXXX 7935
PERIOD: 11 July 2014 - 10 August 2014

CARD USER	PURPOSE	DATE OF USE	VENDOR NAME	AMOUNT	DESCRIPTION
Radford Shearill	Food	22-Jul-14	Loagan's Diberville, MS	\$22.87	DARE Conference
Radford Shearill	Food	23-Jul-14	Palace Casino Biloxi	\$13.91	DARE Conference
Radford Shearill	Lodging	24-Jul-14	Palace Casino Biloxi	\$264.32	DARE Conference
Jeff Waldrop	Registration	6-Aug-14	City of Gastonia, NC	\$300.00	Snipper training

TOTAL NEW CHARGES \$601.10

TOTAL TO PAY \$601.10


Hardy Crunk
Purchase Clerk

Date



CARD ONE

Account Number: XXXX XXXX XXXX 7935

Billing Questions:

800-854-7642

Website:

www.24-7cardaccess.com

Send Billing Inquiries To:

P.O. Box 2988, Omaha, NE, 68103

MERCHANTS & FARMERS BANK Credit Card Account Statement
July 11, 2014 to August 10, 2014

SUMMARY OF ACCOUNT ACTIVITY

Previous Balance	\$3,213.75
- Payments	\$3,069.32
- Other Credits	\$0.00
+ Purchases	\$601.10
+ Cash Advances	\$0.00
+ Fees Charged	\$0.00
+ Interest Charged	\$14.92
= New Balance	\$760.45

Account Number XXXX XXXX XXXX 7935
 Credit Limit \$10,000.00
 Available Credit \$9,162.00
 Statement Closing Date August 10, 2014
 Days in Billing Cycle 31

PAYMENT INFORMATION

New Balance: \$760.45
 Minimum Payment Due: \$19.00
 Payment Due Date: September 4, 2014

Randall Judd

MESSAGES

ENROLL WITH E-STATEMENTS TODAY! GO TO WWW.24-7CARDACCESS.COM TO ENROLL WITH E-STATEMENTS, SET UP EMAIL ALERTS TO NOTIFY YOU WHEN YOUR STATEMENT IS AVAILABLE, AND DOWNLOAD YOUR E-STATEMENT EVERY MONTH. GET YOUR STATEMENT QUICKER, INCREASE THE SECURITY OF YOUR ACCOUNT BY NOT RECEIVING YOUR STATEMENT IN THE MAIL, AND SAVE PAPER BY ENROLLING WITH E-STATEMENTS TODAY!

NOTICE: See reverse side of page 1 for important information.

5106 0001 JRH 001 7 5 140810 0 PAGE 1 of 2 1 0 1443 0000 BS1 01A85106 926

MERCHANTS & FARMERS BANK
 PO BOX 723847
 ATLANTA GA 31139-0847



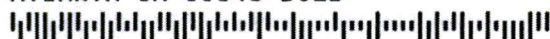
Account Number: XXXX XXXX XXXX 7935
 New Balance: \$760.45
 Minimum Payment Due: \$19.00
 Payment Due Date: September 4, 2014

Please complete and enclose the bottom portion for proper credit.

Indicate name or address change on reverse side and check here.

Make Check Payable to:

CARD SERVICES CENTER
 PO BOX 105025
 ATLANTA GA 30348-5025



Amount Enclosed: \$



Payments received at other than the address shown on the front of this statement may be subject to a delay in crediting of up to 5 days after the date of receipt.

CARD ONE 926
 MADISON SHERIFFS DEPT
 2941 HWY 51
 CANTON MS 39046 UPGR



547795007520793500001900000760459

1-2

JRH



TRANSACTIONS

An amount followed by a minus sign (-) is a credit unless otherwise indicated.

Tran Date	Post Date	Reference Number	Transaction Description	Amount
07/10	07/10	8542120JJ00XTPNZJ	PAYMENT - THANK YOU	\$1,691.07-
08/06	08/06	8542120KQ00XTTV7E	PAYMENT - THANK YOU	\$1,378.25-
07/10	07/10		*FINANCE CHARGE* PREV CYCLE PURCHASES	\$0.66-
07/22	07/22	0543684JW5S9RNHHY	LOGANS #494 DIBERVILLE MS	\$22.87 <i>SO-2</i>
07/23	07/23	5526048JX61H3P3A0	PALACE CASINO RESORT BILOXI MS	\$13.91 <i>SO-2</i>
07/24	07/24	5526048JY8AD9D42D	PALACE CASINO RESORT BILOXI MS	\$264.32 <i>SO-1</i>
		CHECK-IN 07/20/14	FOLIO #7502851203	
08/06	08/06	8550499KBS66M36DW	CITY OF GASTONIA GASTONIA NC	\$300.00

2.0% per Trn.

INTEREST CHARGE CALCULATION

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Days in Billing Cycle	Interest Charge
Purchases	14.49% (v)	\$1,290.44	31	\$15.58
Cash Advances	20.49% (v)	\$0.00	31	\$0.00

(v) - variable

You can avoid additional interest on purchases by paying the New Balance in full by the payment due date. Payments received at other than the address shown on the front of this statement may be subject to a delay in crediting of up to 5 days after the date of receipt. Payments and credits are effective as of the post date shown on this statement.

In order to ensure timely application of your payment, please remit payments to the following address:

CARD SERVICES CENTER

PO BOX 105025

ATLANTA, GA 30348-5025

For more information about your account, please contact us at: 1-800-854-7642
to speak to a live representative (24 hours/7 days).

ENROLL WITH E-STATEMENTS TODAY! Go To: www.24-7cardaccess.com TO ENROLL WITH E-STATEMENTS, SET UP EMAIL ALERTS TO NOTIFY YOU WHEN YOUR STATEMENT IS AVAILABLE, AND DOWNLOAD YOUR E-STATEMENT EVERY MONTH. GET YOUR STATEMENT QUICKER, INCREASE THE SECURITY OF YOUR ACCOUNT BY NOT RECEIVING YOUR STATEMENTS IN THE MAIL, AND SAVE PAPER BY ENROLLING WITH E-STATEMENTS TODAY!

NOTICE: See reverse side of page 1 for important information.

07/23/14

12:01

SALES DRAFT

Palace Buffet

MERCH ID: 390450
CASHIER: Danielle
TERMINAL: 44

Master Card

NAME: TWO/CARD
NUMBER: XXXXXXXXXXXX7935
EXPIRE: XX/XX
AUTH: 02344C
AMOUNT: 13.91

CHECK: 442802
TABLE:

TOTAL: 13.91

GRATUITY:

0
13.91

TOTAL:

I agree to pay above total amount according to my card issuer agreement.

X *[Signature]*
SIGNATURE

50-29

DATE 7/22/14 TIME 6:29:19PM
MID 494

Logans 494
3891 Promenade Parkway
D'Iberville, MS
39540
228-392-8813

Gratuity not included
Thank you for your patronage

MASTER XXXXXXXXXXXX7935 S
AUTH 02292C TBL 61 CHECK 381173
PRE-AUTH DINING MICHAEL C

SDC ID: DjnNj9JPFMrc3fEXhn

AMOUNT 21.37
TAX 1.50

SUBTOTAL \$ 22.87

TIP \$ *0*

TOTAL \$ *22.87*

CUSTOMER COPY

50-29

[Checkmark]



PALACE CASINO RESORT.

 BILOXI, MISSISSIPPI

RADFORD SHEARRILL *SO-29*
 2941 HWY 51
 CANTON MS 39046

Room Number: PH 513
 Arrival Date: 07/20/2014
 Departure Date: 07/24/2014
 Confirmation Number: 417502851203
 Page No: 1 of 1
 Date: 07/24/2014

Date	Description	Charges	Credits
07/20/2014	ROOM CHARGE PH 513	59.00	
	TAX1	4.13	
	TAX2	2.95	
07/21/2014	ROOM CHARGE PH 513	59.00	
	TAX1	4.13	
	TAX2	2.95	
07/22/2014	ROOM CHARGE PH 513	59.00	
	TAX1	4.13	
	TAX2	2.95	
07/23/2014	ROOM CHARGE PH 513	59.00	
	TAX1	4.13	
	TAX2	2.95	
07/24/2014	FD MASTERCARD *****7935	264.32-	

Balance .00

Signature _____



EVENT INFORMATION

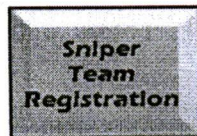


**Gastonia
Sniper Conference
October 22-25, 2014**

MAIN MENU

- Home
- GPD SWAT Team
- Training Opportunities
- 2014 Event Info
- 2014 Sniper Registration**
- 2014 Sponsor Registration**
- Payment Information**
- 2014 Registered Teams**
- 2014 Sponsors**
- 2013 Results
- 2012 Results
- 2011 Results
- 2010 Results
- 2009 Results
- 2008 Results
- 2007 Results
- Competition Rules
- Event Photos & Video

NEWSFLASH



Address to the
Gastonia Police
Department Range
is

2013 CONFERENCE PLATINUM SPONSORS



Home » 2014 Event Info » 2014 Sniper Registration

2014 Sniper Registration

Hosted by Eric Howard

Entry for this year's conference are as follows:

Registration is \$300. per two man team and alternate (All fees must be received before September 1, 2014)

You may register two teams per agency. Exceptions would be military groups from the same branch but stationed at different locations, state or federal agencies from different field offices. These will be considered as different groups and allowed to register two team per location / office.

If the registration is full please sign in on the waiting list. As soon as one team drops the slot is filled with waiting list teams.

It is our goal to allow as many different agencies as possible. A second agency team may be registered on the waiting list along with the others. The waiting list teams will be moved, in the order received, to the unfilled active team list on or after August 1st as slots are available. New agencies who do not have a registered team will be given priority and moved first.

Teams must register using the online form below. The online registration is always open and holds your slot as soon as it is entered.

PLEASE READ THE INSTRUCTIONS BELOW BEFORE YOU FILL OUT THE REGISTRATION FORM:

Registration is not complete until your signed and notarized Release & Assumption of Risk form and payment is received.

Please click here for the Competition Rules

Make checks payable to the City of Gastonia and mail to:

Gastonia Police Department
 Captain Mike Smith
 P.O. Box 1748
 Gastonia, NC 28053

Credit Card Payments must be made contacting:
 Nancy Capistran
 704-866-6884
 capistran_nancy@cityofgastonia.com

Alternates must complete waivers. There is no charge for observers, unless they plan to attend the awards banquet. This fee has not yet been determined and may be paid at the door.

We are confident that the experiences and challenges you will face through out this conference will be valuable to you in future situations.

PLEASE READ THE INSTRUCTIONS BELOW BEFORE YOU FILL OUT THE REGISTRATION FORM:

In the Full name block put Agency / Department name not the sniper's name. Include next of kin, troop or location here if it applies. (example: NC Highway Patrol, H Troop). In the second block put the primary contact email for your team. All future information about the event will come to this email address.

Chief, Sheriff, Agency head information is for the chief's lunch invitation. List the person's name and address who should be mailed this formal invitation. Cell numbers will be used to contact teams with after hours updates if necessary. We will need T Shirt and boot Sizes of all competitors and email addresses.

Date & Time: Friday, 10 January 2014, 0:00 — Wednesday, 22 October 2014, 0:00

GOLD SPONSORS



SILVER SPONSOR



BRONZE SPONSOR



VENDOR



HOSPITALITY

2620 Bob & Pat Boyd Dr.
Gastonia, NC 28052

Location: Gastonia Police Firearms & Training Center
2620 Weetabix Pkwy (map)
Gastonia, North Carolina
28052
US
Registration Deadline: <https://maps.google.com/maps?oe=UTF-8&q=2620+weeta>
Wednesday, 22 October 2014



DISTRIBUTOR OF FIREARMS, AMMUNITION, SHOOTING
SPORTS ACCESSORIES AND POLICE EQUIPMENT

STATISTICS
Visitors: 397873

Full Name: *

Email: *

Number of people: * 1

Department Name (Also put this in the Full name Slot):

Mailing Address:

Sniper #1:

Sniper 1 Phone Number:

Sniper 1 T Shirt Size:

Email:

Sniper #2:

Sniper 2 Phone Number:

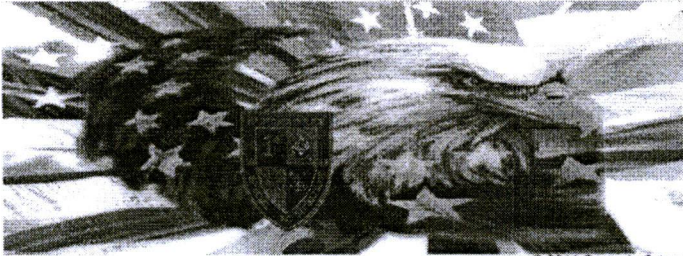
Sniper 2 TShirt Size:

Email:

Alternate:

Alternate phone number:

Alternate T Shirt Size:



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