

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

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

30 October 2014

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

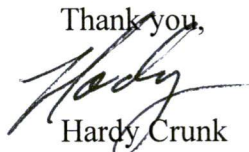
Subject: Place October 2014 SO credit card report on minutes

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 10 September 2014 – 10 October 2014.

Thank you,

  
Hardy Crunk  
Purchasing Clerk

SO CREDIT CARD REPORT

M&F MASTERCARD  
XXXX XXXX XXXX 7935  
10 SEPT 2014 - 10 OCT 2014

CARD USER	PURPOSE	DATE OF USE	VENDOR NAME	AMOUNT	DESCRIPTION
BRAD SULLIVAN	FOOD	22-Sep-14	HALF SHELL MEMPHIS	\$32.94	STARS (DUI) CONFERENCE
BRAD SULLIVAN	FOOD	23-Sep-14	MEMPHIS BARBEQUE	\$26.15	STARS (DUI) CONFERENCE
BRAD SULLIVAN	FOOD	24-Sep-14	STEAK N SHAKE	\$7.51	STARS (DUI) CONFERENCE
BRAD SULLIVAN	LODGING	25-Sep-14	FAIRFIELD MEMPHIS	\$284.49	STARS (DUI) CONFERENCE

TOTAL \$351.09

AMOUNT TO PAY \$351.09

*Handwritten signature*  
DATE: 030 Oct 2014



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 September 10, 2014 to October 10, 2014

SUMMARY OF ACCOUNT ACTIVITY

Table with 2 columns: Description and Amount. Rows include Previous Balance (\$1,631.66), Payments (\$1,292.36), Other Credits (\$108.98), Purchases (\$351.09), Cash Advances (\$0.00), Fees Charged (\$0.00), Interest Charged (\$10.75), and New Balance (\$592.16).

PAYMENT INFORMATION

Table with 2 columns: Description and Amount. Rows include New Balance (\$592.16), Minimum Payment Due (\$15.00), and Payment Due Date (November 4, 2014).

Account Number XXXX XXXX XXXX 7935
Credit Limit \$10,000.00
Available Credit \$9,407.00
Statement Closing Date October 10, 2014
Days in Billing Cycle 31

Handwritten signature: Pamela J...

TRANSACTIONS

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

Table with 5 columns: Tran Date, Post Date, Reference Number, Transaction Description, and Amount. Lists transactions from 09/10 to 09/25, including credits from WWW.TEXTNOW.COM and various payments.

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

5106 0001 JRH 001 7 5 141010 0 PAGE 1 of 2 10 1443 0000 BSI 01A85106 1014

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



Account Number: XXXX XXXX XXXX 7935
New Balance: \$592.16
Minimum Payment Due: \$15.00
Payment Due Date: November 4, 2014

Please complete and enclose the bottom portion for proper credit.

Amount Enclosed: \$

Handwritten amount: 351.09

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

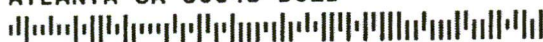
Payments received at other than the address shown on the front of this statement may be subject to a delay in crediting of up to 5 days after the date of receipt.

Make Check Payable to:

CARD SERVICES CENTER
PO BOX 105025
ATLANTA GA 30348-5025

CARD ONE
MADISON SHERIFFS DEPT
2941 HWY 51
CANTON MS 39046

1014
UPGR







CARD ONE

Account Number: XXXX XXXX XXXX 7935

**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)	\$890.15	31	\$10.75
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](http://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.

1-2

Steak 'n Shake No: 3017704

Order: 25000 P17: 0  
Name: Alexia D 9/24/2014 1:13 PM  
Subtotal 6.87  
Tax 0.64  
Total 7.51  
Master Card Ending:7935 Amount 7.51

CARD Balance: 0.00

20.23

\*\*\*\*\*

1/2 Price Happy Hour!!!

Shakes and Drinks

Weekdays 2-4 PM and now 2-4 AM!

2-4 AM valid at 24 hour locations

\*\*\*\*\*

THANK YOU FOR VISITING

Tell Us About Your Experience

1-877-STK-N-SHK (1-877-785-6745)

To contact this store

Call (901)755-3483

Join our eClub at [www.steaknshake.com](http://www.steaknshake.com)  
to receive the latest news, promotions  
and special offers!!!

Customer Copy

Half Shell  
Memphis, TN  
(901)737-6755

Date: Sep22'14 07:38PM  
Card Type: Mastercard  
Acct #: XXXXXXXXXXXX7935  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Trans Key: FIF002275462741  
Auth Code: 02268C  
Check: 1795  
Table: 66/1  
Server: 15 Nancy B

Subtotal: 32.94

Tip: \_\_\_\_\_

Total: \_\_\_\_\_

CUSTOMER COPY

20.23

Take the Half Shell To-Go !!

Memphis BBQ  
World Champion BBQ  
709 Desoto Cove

Server: Leslie                      DOB: 09/23/2014  
07:36 PM                              09/23/2014  
Table 31/3                            4/40056

SALE

M/C                                      1048630  
Card #XXXXXXXXXXXX7935  
Magnetic card present:  
Card Entry Method: S

Approval: 02366C

Amount:                      \$ 26.15

+ Tip:                      \_\_\_\_\_

= Total:                      26<sup>15</sup>  
~~26.15~~

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

X \_\_\_\_\_ 50-23

Don't forget to check out our Q shop

15%: 3.92

18%: 4.71

20%: 5.23

Merchant Copy



Fairfield Inn & Suites by Marriott  
 Memphis Olive Branch

7044 Hacks Cross Road  
 Olive Branch, Ms 38654  
 662.892.4469



B. Sullivan

Room: 329  
 Room Type: KING  
 Number of Guests: 1  
 Rate: \$87.00 Clerk:

Arrive: 22Sep14 Time: 02:22PM Depart: 25Sep14 Time: Folio Number: 92142

Date	Description	Charges	Credits
22Sep14	Room Charge	87.00	
22Sep14	State Occupancy Tax	6.09	
22Sep14	Occupancy Sales Tax	1.74	
23Sep14	Room Charge	87.00	
23Sep14	State Occupancy Tax	6.09	
23Sep14	Occupancy Sales Tax	1.74	
24Sep14	Room Charge	87.00	
24Sep14	State Occupancy Tax	6.09	
24Sep14	Occupancy Sales Tax	1.74	
25Sep14	Master Card		284.49
	<i>Card #: MCXXXXXXXXXXXX7935/XXXX</i> <i>Amount: 284.49 Auth: 02215C Signature on File</i> <i>This card was electronically swiped on 22Sep14</i>		
	<b>Balance:</b>	<b>0.00</b>	

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