

**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

2 January 2013

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

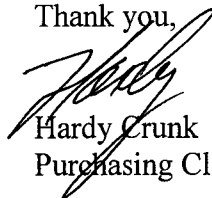
Subject: Place monthly credit card report on minutes

Gentlemen:

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

Sheriff's Department Visa M&F for billing period 10 November 2012 – 10 December 2012.

Thank you,

  
Hardy Crunk  
Purchasing Clerk

SO CREDIT CARD REPORT

VISA M&F  
 547795007520XXXX  
 10 Nov 2012 - 10 Dec 2012

CARD USER	PURPOSE	DATE OF USE	VENDOR NAME	AMOUNT	DESCRIPTION
MCNEIL ETAL	FOOD	14-Nov-12	HIGH TIDE CAFÉ	\$45.50	MS GANG ASSO MEETING
MCNEIL ETAL	FOOD	15-Nov-12	BACK BAY BUFFET	\$24.00	MS GANG ASSO MEETING
MCNEIL ETAL	FOOD	15-Nov-12	BACK BAY BUFFET	\$24.00	MS GANG ASSO MEETING
MCNEIL ETAL	FOOD	15-Nov-12	HIGHLIGHTS	\$19.26	MS GANG ASSO MEETING
MCNEIL ETAL	FOOD	16-Nov-12	RUBY TUESDAYS	\$69.04	MS GANG ASSO MEETING
MCNEIL ETAL	LODGING	16-Nov-12	IP BILOXI	\$167.98	MS GANG ASSO MEETING
MCNEIL ETAL	LODGING	16-Nov-12	IP BILOXI	\$167.98	MS GANG ASSO MEETING
MCNEIL ETAL	FOOD	16-Nov-12	BACK BAY BUFFET	\$24.00	MS GANG ASSO MEETING

TOTAL \$541.76

AMOUNT TO PAY \$541.76

NOTE: THE CONFERENCE WAS ATTENDED BY MCNEAL, PODSKARBY, JESSIE SMITH, AND SHAVERS.

DATE: 2 Jan 2013  
*Handwritten Signature*



CARD ONE

Account Number: XXXX XXXX XXXX 7935

Billing Questions: 800-854-7642

Website: www.24-7cardaccess.com

Send Billing Inquiries To: 1550 N. Brown Rd, Ste 150, Lawrenceville, GA 30043

MERCHANTS & FARMERS BANK Credit Card Account Statement  
November 10, 2012 to December 10, 2012

SUMMARY OF ACCOUNT ACTIVITY

Previous Balance	\$313.91-
- Payments	\$0.00
- Other Credits	\$0.00
+ Purchases	\$541.76
+ Cash Advances	\$0.00
+ Fees Charged	\$30.00
+ Interest Charged	\$0.00
= New Balance	\$257.85

PAYMENT INFORMATION

New Balance: \$257.85  
 Minimum Payment Due: \$10.00  
 Payment Due Date: January 4, 2013

Account Number XXXX XXXX XXXX 7935  
 Credit Limit \$10,000.00  
 Available Credit \$9,742.00  
 Statement Closing Date December 10, 2012  
 Days in Billing Cycle 31

TRANSACTIONS

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

Tran Date	Post Date	Reference Number	Transaction Description	Amount
11/14	11/14	5554186NG03R76MVW	HIGH TIDE CAFE BILOXI MS	✓ \$45.50
		CHECK-IN 11/14/12	FOLIO #000005477	
11/15	11/15	5554186NH03R59PET	IP-MS BACK BAY BUFFET 0ILOXI MS	✓ \$24.00
		CHECK-IN 11/15/12	FOLIO #000005477	
11/15	11/15	5554186NH03R59PE8	IP-MS BACK BAY BUFFET 0ILOXI MS	✓ \$24.00
		CHECK-IN 11/15/12	FOLIO #000005477	
11/15	11/15	5554186NH03R59S1R	HIGHLIGHTS BAR BILOXI MS ?	✓ \$19.26
		CHECK-IN 11/15/12	FOLIO #000005477	
11/16	11/16	0543684NJ2X8M65YB	RUBY TUESDAY #4816 DIBERVILLE MS	✓ \$69.04

*Handwritten signature*

Transactions continued on next page

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

5106 0001 BHH 001 7 5 121210 0 PAGE 1 of 2 10 1443 0000 BSI 01AB5106 1810

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



Account Number: XXXX XXXX XXXX 7935  
 New Balance: \$257.85  
 Minimum Payment Due: \$10.00  
 Payment Due Date: January 4, 2013

Please complete and enclose the bottom portion for proper credit.

Amount Enclosed: \$

541.76

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:

BANKCARD CENTER  
PO BOX 569200  
DALLAS TX 75356

CARD ONE UPGR  
 MADISON SHERIFFS DEPT 1810  
 2941 HWY 51  
 CANTON MS 39046



547795007520793500001000000257851



CARD ONE

Account Number: XXXX XXXX XXXX 7935

TRANSACTIONS (continued)

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

Tran Date	Post Date	Reference Number	Transaction Description	Amount
11/16	11/16	5554186NK03RB8SZP	IP-MS LODGING BILOXI MS	✓ \$167.98
		CHECK-IN 11/14/12	FOLIO #000005477	
11/16	11/16	5554186NK03RB8SZ6	IP-MS LODGING BILOXI MS	✓ \$167.98
		CHECK-IN 11/14/12	FOLIO #000005477	
11/16	11/16	5554186NK03RB8YH5	IP-MS BACK BAY BUFFET BILOXI MS	\$24.00
		CHECK-IN 11/16/12	FOLIO #000005477	
12/05	12/05	F144300P4000N0000	ANNUAL CHARGE FOR 12/12 THROUGH 11/13	\$30.00

2 Rooms - 4 People

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)	\$0.00	31	\$0.00
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.

Card Services now has extended hours of operation and added Saturday hours for your convenience.

Mon-Fri 8:00 AM - 8:00 PM EST  
Saturday 8:00 AM - 4:00 PM EST

For more information about your account, contact our Automated Account Inquiry Line (24 hours/7 days) at: 1-800-854-7642

Internet Access Now Available for Account Information  
Go To: www.24-7cardaccess.com

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

1-2

BHH

IP Casino, Resort & Spa  
High Tide Cafe

3546 David

8275 NOV14'12 11:21AM GST

Sierra Mist	2.50
The Club	10.95
Shrimp Pboy	10.95
Diet	2.50
The Club	10.95
Food Total	37.85
Tax	2.65
Amount Due	<b>\$40.50</b>

tuity: 5.00

AL: 45.50

n Number \_\_\_\_\_

Guest Name (Please Print)

Guest Signature

visit us at [www.ipbiloxi.com](http://www.ipbiloxi.com)  
hope to see you again soon!

IP Casino, Resort & Spa  
Highlights Sports Lounge

Alyssa

3263 C1  
NOV15'12 7:05PM

Tower Rings	7.00
BBQ/Bac/Mu Burg	11.00
Food Total	18.00
Tax	1.26
Payment	<b>19.26</b>
XXXXXXXXXXXX7935	XX/XX
Master Card	19.26
643 CLOSED NOV15	7:45PM

IP Casino, Resort & Spa  
Buffet

9 Briana

87 NOV15'12 7:30AM GST 2

REPRINT  
CLOSED CHECK

Breakfast 22.42  
Mug Root Beer 0.00  
Sweet Tea 0.00

Food Total 22.42  
Tax 1.58

Payment 24.00

XXXXXXXXXXXX7935 XX/XX

Master Card 24.00

3139 CLOSED NOV15 7:31AM-

tuity: \_\_\_\_\_  
AL: \_\_\_\_\_  
m Number: \_\_\_\_\_

Guest Name (Please Print)

Guest Signature

Plan your next visit with us at  
www.ipbiloxi.com.  
Hope to see you again soon!

IP Casino, Resort & Spa  
Buffet

3139 Briana

CHK 972 NOV16'12 7:20AM GST 2

REPRINT  
CLOSED CHECK

2 Breakfast 22.42  
1 Mug Root Beer 0.00  
1 Sweet Tea 0.00

Food Total 22.42  
Tax 1.58

Payment 24.00

XXXXXXXXXXXX7935 XX/XX

Master Card 24.00

3139 CLOSED NOV16 7:20AM--

tuity: \_\_\_\_\_  
AL: \_\_\_\_\_  
m Number: \_\_\_\_\_

Guest Name (Please Print)

Guest Signature

Plan your next visit with us at  
www.ipbiloxi.com.  
Hope to see you again soon!

RUBY TUESDAY

RT4816

Diberville, MS 39540

Credit Card Voucher

825 Kar

Tbl B5/:

1 ICE  
1 CHZ  
ax Coll

1 FRIE  
1 ICE  
ax Coll

1 SHEL  
1 ROOT  
ax Coll

1 SMOK  
1 ICE  
ax Coll

Sub  
Tax  
Total

Get  
When  
HURRY

Date: Nov16'12 12:47PM  
Card Type: Mastercard  
Acct #: XXXXXXXXXXXX7935  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Auth Code: 016904  
Check: 3524  
Table: B5/1  
Server: 825 Kari N  
CARD ONE

Subtotal: 63.04

Gratuity: 6.00

Total: 69.04

Signature

GUEST COPY  
(Please retain for your records)  
Fan us! Facebook.com/RubyTuesday  
Join us online! RubyTuesday.com

WELCOME TO  
BACK BAY BUFFET  
at  
IP CASINO, RESORT & SPA

ORDER #13

Name : C. ONE

Station: IPB00001  
k: BB-KIOSK4  
r ID: 790963  
OS CHK#: 113  
: 11/15/2012  
: 08:06 AM

Dine In

breakfast - Adult \$24

1 Coffee

1 Diet Pepsi

TOTAL \$24.00

Customer Name: CARD ONE

Paid - Card#: \*\*\*\*\*7935

MASTERCARD

Balance \$24.00  
\$0.00

X \_\_\_\_\_

Thank You





**Casino  
Resort Spa**

Name: CHARLES MCNEAL

Address: 920 HWY 17

CANTTON

MS 39046

Folio ID: 412275075665

Arrival Date: 11/14/2012

Departure Date: 11/16/2012

Room No: MT 1323

Guests: 2

Group Code: S126126

DATE	REFERENCE	DESCRIPTION	CHARGES	BALANCE
11/14/2012	412269000368	RESORT FEE	5.60	
		RESORT FEE		
11/14/2012	412269001371	ROOM CHARGE MT 1323	69.99	
		TAX2	8.40	
		MS ASSN OF GANG INVESTIG		
11/15/2012	412279000367	RESORT FEE	5.60	
		RESORT FEE		
11/15/2012	412279001336	ROOM CHARGE MT 1323	69.99	
		TAX2	8.40	
		MS ASSN OF GANG INVESTIG		
11/16/2012	412285101434	FRONT DESK MASTERCARD	167.98-	
		*****7935		
		SUMMARY OF CHARGES		
		ROOM	139.98	
		MISC	10.00	
		TAX2	18.00	
<p>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.</p>				
GUEST SIGNATURE: _____			Balance Due:	.00

APPROVED BY: \_\_\_\_\_





**Casino  
Resort Spa**

Name: CHARLES MCNEAL

Address: 920 HWY 17

CANTTON

MS 39046

Folio ID: 412275075668

Arrival Date: 11/14/2012

Departure Date: 11/16/2012

Room No: MT 1324

Guests: 2

Group Code: S126126

DATE	REFERENCE	DESCRIPTION	CHARGES	BALANCE
11/14/2012	412269000369	RESORT FEE	5.60	
		RESORT FEE		
11/14/2012	412269001372	ROOM CHARGE MT 1324	69.99	
		TAX2	8.40	
		MS ASSN OF GANG INVESTIG		
11/15/2012	412279000368	RESORT FEE	5.60	
		RESORT FEE		
11/15/2012	412279001337	ROOM CHARGE MT 1324	69.99	
		TAX2	8.40	
		MS ASSN OF GANG INVESTIG		
11/16/2012	412285101426	FRONT DESK MASTERCARD *****7935	167.98-	
		SUMMARY OF CHARGES		
		ROOM	139.98	
		MISC	10.00	
		TAX2	18.00	
<p>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.</p>				
GUEST SIGNATURE: _____			Balance Due:	.00

APPROVED BY: \_\_\_\_\_