Purchasing Department

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

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

23 April 2015

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 April 2015 SO credit card report on minutes

Gentlemen:

Per statuary requirements, please place the following monthly credit card report and accompanying documentation on the minutes and authorize payment of same:

Sheriff's Department MasterCard for billing period 11 March 2015 – 9 April 2015.

Thank you,

Purchasing Clerk

M&F MASTERCARD XXXX XXXX XXXX 2655 11 MARCH 2015 - 9 APRIL 2015

CARD USER	PURPOSE	DATE OF USE	AMOUNT	VENDOR NAME	DESCRIPTION
D-3/D-61	FOOD	23-Mar-15	73.30	LONGHORN	INVESTIGATIVE INTERNET TRAINING
SO-7	FOOD	23-Mar-15	84.48	WAL-MART	FOOD FOR SWAT TRAINING
D-3/D-61	FOOD	24-Mar-15	43.77	OUTBACK	INVESTIGATIVE INTERNET TRAINING
D-3/D-61	FOOD	24-Mar-15	15.89	RAISING CANE'S	INVESTIGATIVE INTERNET TRAINING
D-3/D-61	FOOD	25-Mar-15	20.31	HARDEE'S	INVESTIGATIVE INTERNET TRAINING
D-3/D-61	LODGING	26-Mar-15	189.66	HAMPTON INNS	INVESTIGATIVE INTERNET TRAINING
SO-7	FOOD	2-Apr-15	23.00	EL NOPALITO	SWAT TRAINING
SO-7	LODGING	3-Apr-15	1,203.36	HOLIDAY INN EXPRES	SWAT TRAINING
A-9	REGISTRATION	6-Apr-15	125.00	CHILDRENSAD	CHILDREN'S CONFERENCE
A-9	FOOD	7-Apr-15	11.76	EL SALTILLO IV	CHILDREN'S CONFERENCE
A-9	REGISTRATION	8-Apr-15	25.00	CHILDRENSAD	CHILDREN'S CONFERENCE
A-9	FOOD	8-Apr-15	19.33	PICCADILLY	CHILDREN'S CONFERENCE

TOTAL

1,834.86

AMOUNT TO PAY

1,834.86

Hardfil 2018 23 April 2018

800-854-7642

CARD ONE Account Number: XXXX XXXX XXXX 2655

Billing Questions:

Website:

www.24-7cardaccess.com

Send Billing Inquiries To:

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

THE EVERYWHERE CARD Credit Card Account Statement March 11, 2015 to April 9, 2015

SUMMARY OF ACCOUNT ACTIVITY

Previous Balance	\$2,126.56
- Payments	\$0.00
- Other Credits	\$0.00
+ Purchases	\$1,834.86
+ Cash Advances	\$0.00
+ Fees Charged	\$39.00
+ Interest Charged	\$27.39
= New Balance	\$4,027.81
Account Number	XXXX XXXX XXXX 2655
Credit Limit	\$10,000.00
Available Credit	\$5,690.00
Statement Closing Date	April 9, 2015

PAYMENT INFORMATION

New Balance:	\$4,027.81
Minimum Payment Due:	\$154.00
Payment Due Date:	May 4, 2015

(and June

TRANSACTIONS

Days in Billing Cycle Amount Past Due

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

Tran	Post	Reference Number	Transaction Description	Amount
Date	Date			
03/23	03/23	05410192KBHPGXS1A	LONGHORN STEAK00052589 HATTIESBURG MS	\$73.30 D-3
03/23	03/23	55483822KBLGZ969Z	WAL-MART #2846 OLIVE BRANCH MS	\$84.48 50-7
03/24	03/24	55432862L00V7RBBD	OUTBACK 2516 HATTIESBURG MS	\$43.77 D-3
03/24	03/24	05140482MLM8PZVL5	RAISING CANE'S #44 HATTIESBURG MS	\$15.89° D-3
03/25	03/25	25247802L01JQP29G	HARDEES OF PETAL PETAL MS	\$20,31° D-3
03/26	03/26	55541862M03RFS2ZA	HAMPTON INNS HATTIESBU HATTIESBURG MS	\$189.66 D-3
		CHECK-IN 03/23/15	FOLIO #19339 0	
04/02	04/02	55500802X60T2JN09	EL NOPALITO HOLLY SPRINGS MS	\$23.00 So -7
				Transactions continued on next page

30

\$53.00

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

5106 0002 JRH

001 7 5 150409 0

DPAGE 1 of 2

1 0 1443 0000 BS1 01AB5106

362

THE EVERYWHERE CARD PO BOX 723847 ATLANTA GA 31139-0847 MasterCard

Minimum Payment Due:

Account Number: XXXX XXXX XXXX 2655

New Balance:

\$4,027.81 \$154.00

Payment Due Date:

May 4, 2015

Please complete and enclose the bottom portion for proper credit.

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

TO MAKE IN CORPORATION TO AN ADMINISTRATION OF THE PROPERTY OF

Make Check Payable to:

 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 MADISON SHERIFFS DEPT 2941 HWY 51

362 UPGR

CANTON MS 39046

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-2



CARD ONE Account Number: XXXX XXXX XXXX 2655

Tran Date	Post Date	Reference Number	Transaction Description	Amount
04/03	04/03	55432862Y00T0JAEH CHECK-IN 03/22/15	HOLIDAY INN EXPRESS OLIVE BRANCH MS FOLIO #178536	\$1,203.36 507
04/06 04/07	04/06 04/07	554295030S1BARJLA 554213532WMP0RA9X	PAYPAL *CHILDRENSAD 4029357733 CA EL SALTILLO IV BILOXI MS	\$125.00 A -9 \$11.76 A -9
04/08 04/08 04/09	04/08 04/08 04/09	554295032S1QYHGZJ 5531020335V4E5HJ1	PAYPAL *CHILDRENSAD 4029357733 CA PICCADILLY BILOXI MS LATE FEE	\$25.00 A -9 \$19.33 A -9 \$39.00

THIS IS A REMINDER-YOUR ACCOUNT IS ONE PAYMENT PAST DUE. IF YOUR PAYMENT HAS BEEN MAILED PLEASE DISREGARD THIS NOTICE.

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)	\$2,267.74	30	\$27.39
Cash Advances	20.49% (v)	\$0.00	30	\$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!

5106 0002 JRH

I compliant to the 33 Par Handy or

Hattiesburg, MS 39403

ID # 3891 81575 9365

*********** * We value your opinion. Please

* tell us about your dining

* experience by completing an

* your visit. You could win a * \$1,000 Grand Frize or 1 of 100

* \$50 prizes. Winners are drawn

* To complete the survey and enter

www.LongHornSurvey.com and enter

NO PURCHASE NECESSARY. Void where prohibited. See Official Rules at

* Faloramos su opinión. Complete la *

* sincuesta sobre su experiencia

* online survey within 7 days of

Check # :23914

Table 45

monthly!!

*

×

* the contest, go to

the ID on this receipt.

* www.LongHornSurvey.com.

* www.LongHornSurvey.com.

R EXPIRES Mar 30, 2015)

· stronómica en

Brad C

08:14 PM 03/23/2015 Transaction #:982046333

Gst 2

Check # :23914

Table 45 Frad C

20:12:38 03/23/2015

Gst 2

Guest No.1

LongHorn 5258

4503 Handy St

antresoung, MS 39403

1 Tea Sweet 2.69 1 Swest Chili Calamari 8.99 1 Jut an Ribeys 18oz

25,49

Guest No.2

1 Water

1 Dutlaw Ribeys 18oz

25.49

ID # 3891 8**1575** 9365

vs'us your opinion. Please us about your dining erence by completing an ire survey within ? days of e visit You could win a 000 Grand Prize or 1 of 100 crizes Winners are drawn t ' y!"

complete the survey and enter → contest, go to *1._org HornSurvey.com and enter

NJ PURCHASE NECESSARY Void where * prohibited See Official Rules at * www..ongHormSurvey.com.

 Valoranos su opinión. Complete la * - + - nousets sobre su experiencia gastronómica en

Duplicate Receipt

Stored Order

* Www.sogHornSurvey.com.

OFFER EXPIRES Mar 30, 2015)

vaid Number ×××××× 2655

Auth Code 023427

Master Card

Uneck Amount

Tip Not Included. Suggested tip amounts are provided for your convenience.

Suggested tip amounts are based on total

20% - \$13.66

18% - \$12.29 15% - \$10.25

including any tax.

Cardmember agreet to pay total in

accordance with agreement governing

Please pay this amount Total 68.30

lip Not Included. Suggested tip amounts are provided for your convenience.

Suggested top amounts are pased on notal including any tax.

20% - \$13.66

Subtotal 62.66

5.64

Sales Tax

18% - \$12.29

15% - \$10.25

use of such card.

OUTBACK

O129 Table 34 #Party 2 STEPHANIE C SvrCk: 5 7:34p 03/24/15

1 BURG BLOOM 1 13 STRIP 2 ICE WATER

9.99 20.99

0.00

We value your opinion.
Go to www.TellOutback.com within
the next 3 days and tell us about
your dining experience.

Enter for your chance to win a
\$1000 Grand Prize
 or 1 of 80 \$50 Gift Cards!
 Winners are drawn monthly.

ENTER SURVEY CODE: 419219-531004-365212

NO PURCHASE NECESSARY.
See Official Rules at
www.TellOutback.com for details.
Must be legal US resident 18 or
older. Void where prohibited. Ends
12/31/15

Sub Total:

30.98

TAX

: 2.79

03/24 8:05pTOTAL:

33.77

Here's a SECRET, Mate: Get exclusive deals and insider info. Sign up at OUTBACK.COM/365

03

af 775

0129

Server: STEPHANIE C

Rec:109

03/24/15 20:18, Swiped T: 34 Term: 5

Outback Steakhouse #2516 103 Carlisle Dr. Hattiesburg, MS 39402 (601)264-0771 MERCHANT #:

CARD TYPE
MASTER CARD

ACCOUNT NUMBER
XXXXXXXXXXXXX2655

00 TRANSACTION APPROVED AUTHORIZATION #: 02455Z Reference: 0324010000129

TRANS TYPE: Credit Card SALE

CHECK:

33.77

TIP:

10 00

TOTAL:

多43.77

()-3

Duplicate Copy

CARDHOLDER WILL PAY CARD ISSUER ABOVE AMOUNT PURSUANT TO CARDHOLDER AGREEMENT



3509 Hardy Street Hattiesburg, MS 39402 (601) 264-2729

61 Miriam I

Chk 5423	HARDY Mar24'15 11:54AM	Gst	2
Dine 2 BOX COMB 2 REGULA 2 FOUNTA XXXXXXXXXX	O R IN DRINK XXX2655	14.58	Propriessor.
MasterCa	rd	15.89	
Subtotal AX aymen	2 D-3	14.58 1.31 15.89	

CANE'S ROCKS 2015

* * Customer's Copy * *

Text CANES to 35350 and enter this receipt code for a chance to win a VIP experience at a music festival!

300-445-340-2423

Hardee's

of Petal NEW HAND SCOOPED SHAKES

HOME OF THE THICKBURGER!!

Check 20057

Station 2 Crew: Lee	7 (05 14	Guests 1	0.000	Hardee's Petal	x
Monster Monster Med Cris	3/25/15 Burger CB Burger spy Curl rage Bar	11:41am 10.67	3/25/15 Check Type Terminal Crew	20057 Sale 2 1	11:41
Lnch/Dn 2 Bacor 1/2 Baco - Lettu Med Cris	r Combo n Chs CBO on Chsbgr nce ppy Curl erage Bar	1.08- 10.47	Acct Card Typ Auth Trans ID	ONE/CARD XXXXXXXXXXXX26 Mastercard 02567Z 34730	55
Sub/Tt1	The second secon	18.98	Sale		20.31
Fat In MasterCan Acet: XX Auth: 02 Trans ID	XXXXXXXXXX 2655 567Z	20.31 20.31 20.31	ACCORE (MERC)	REE TO PAY TOTAL DING TO CARD ISS HANT AGMT IF CREI Customer Copy	UER AGMT

Questions or comments Call Ric Jordan District Manager

Order Number 43



HAMPTON INN, 4301 HARDY ST. HATTIESBURG, MS 39402 **TELEPHONE 601-264-8080**

FAX 601.268.9916



Official Hotel Partne

HARDY, JOSH 29 35 HWY 51

name address

room number: arrival date: departure date:

adult/child:

room rate:

119/SXBL 3/23/2015 3/25/2015

1/0 \$87.00

5:07:00PM

CANTON, MS 39046

RATE PLAN HH#

L-GVS

BONUS AL

CAR

Confirmation: 87171269

3/25/2015

PAGE

If the debit/credit card you are using for check-in is attached to a bank or checking account, a hold will

be placed on the account for the full anticipated dollar amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such funds will not be released for 72 business hours from the date of check-out or longer at the discretion of your financial institution.

> Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. Lagree 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 for any part or the full amount of these charges. In the event of an emergency, 1, or someone in my party, require special evacuation due to a physical disability. Please indicate yes by checking here:

signature:

date e	reference	description	amount
3/23/2015 3/23/2015 3/24/2015 3/24/2015	1528021 1528021 1528263 1528263	GUEST ROOM ROOM TAXES GUEST ROOM ROOM TAXES	\$87.00 \$7.83 \$87.00 \$7.83
		WILL BE SETTLED TO MC *2655 EFFECTIVE BALANCE OF	\$189.66 \$0.00
		Ash Man 03	
		ESTIMATE	ED CURRENCY TOTAL

thanks. for reservations call 1.800.hampton or visit us online at hampton.com date of charge folio/check no. account no. 519339 card member name authorization initial establishment no. and location purchases & services establishment agrees to transmit to card holder for payment taxes tips & misc. signature of card member total amount X 0.00





















Walmart > <

ACCOUNT # **** **** 2655 APPROVAL # 02309Z REF # 508300163667 PAYMENT SERVICE - A TERMINAL # MX765579

03/23/15

19:15:49

CHANGE DUE

0.00

ITEMS SOLD 20



Low Prices You Can Trust. Every Day. 03/23/15 19:15:50 (662)252-1666 EL NOPALITO 1688 CRESENT MEADOWS DR HOLLY SPRINGS, MS 38635

04/02/2015

18:18:47

CREDIT CARD

MC SALE

 CARD #
 XXXXXXXXXXXX2655

 INVOICE
 0052

 SEQ #:
 0052

 Batch #:
 000129

 Approval Code:
 00264Z

 Entry Method:
 Swiped

 Mode:
 Online

 PRE-TIP AMT
 \$18.24

TIP

476

TOTAL AMOUNT



**THANK YOU!!!

CUSTOMER COPY



04-03-15

Will Weisenberger 2941 S Liberty Street **Canton Ms** USA_0001 39046

Folio No. A/R Number Group Code

: Government

Arrival Departure : 04-03-15 Conf. No. : 65915221

Room No. : 319

: 03-22-15

Membership No. : Invoice No.

Company

Page No. : 1 of 2

Rate Code: IMGOV

03-22-15	AA		
	*Accommodation	92.00	
03-22-15	State Tax - Room	6.44	
03-22-15	Bed/Occupancy Room Tax	1.84	
03-23-15	*Accommodation	92.00	
03-23-15	State Tax - Room	6.44	
03-23-15	Bed/Occupancy Room Tax	1.84	
03-24-15	*Accommodation	92.00	
03-24-15	State Tax - Room	6.44	
03-24-15	Bed/Occupancy Room Tax	1.84	
03-25-15	*Accommodation	92.00	
03-25-15	State Tax - Room	6.44	
03-25-15	Bed/Occupancy Room Tax	1.84	
03-26-15	*Accommodation	92.00	
03-26-15	State Tax - Room	6.44	
03-26-15	Bed/Occupancy Room Tax	1.84	
03-27-15	*Accommodation	92.00	
03-27-15	State Tax - Room	6.44	
03-27-15	Bed/Occupancy Room Tax	1.84	
03-28-15	*Accommodation	92.00	
03-28-15	State Tax - Room	6.44	
03-28-15	Bed/Occupancy Room Tax	1.84	
03-29-15	*Accommodation	92.00	
03-29-15	State Tax - Room	6.44	
03-29-15	Bed/Occupancy Room Tax	1.84	
03-30-15	*Accommodation	92.00	



04-03-15

03-22-15

319

Will Weisenberger 2941 S Liberty Street Canton Ms USA_0001 39046 Folio No. :
A/R Number :
Group Code :

: Government

Departure : **04-03-15** Conf. No. : **65915221** Rate Code : **IMGOV**

Page No. : 2 of 2

Room No. :

Arrival

Membership No. : Invoice No. :

Company

Date		Charges	Credits		
03-30-15	State Tax - Room			6.44	
03-30-15	Bed/Occupancy Room Tax			1.84	
03-31-15	*Accommodation			92.00	
03-31-15	State Tax - Room			6.44	
03-31-15	Bed/Occupancy Room Tax			1.84	
04-01-15	*Accommodation			92.00	
04-01-15	State Tax - Room			6.44	
04-01-15	Bed/Occupancy Room Tax			1.84	
04-02-15	*Accommodation			92.00	
04-02-15	State Tax - Room			6.44	
04-02-15	Bed/Occupancy Room Tax			1.84	
04-03-15	MasterCard	XXXXXXXXXXXX2655			1,203.36
			Total	1,203.36	1,203.36
			Balance	0.00	

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liablity 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.

LeeAnn Sanders

From:

service@paypal.com

Sent: To:

Monday, April 06, 2015 10:54 AM

LeeAnn Sanders

Subject:

Receipt for your donation to Children's Advocacy Centers of Mississippi

PayPal

Hello Kim Henderson,

This email confirms that you have donated Children's Advocacy Centers of Mississippi \$125.00 USD using PayPal.

This credit card transaction will appear on your bill as "PAYPAL *CHILDRENSAD".

Donation Details

Donation amount:

\$125.00 USD

Total: Purpose: \$125.00 USD

Children's Advocacy Centers of

Mississippi

Reference: Contributor: website Kim Henderson

Message:

registration fee for the 2nd Annual

One Loud Voice Conference

Save Your Payment Information with PayPal

Use your existing PayPal account for future purchases by saving your information.

It's the fastest, safest and most convenient way to buy online.

No need to retype your information for online purchases.

Your personal and financial information are securely stored and never shared.

To encrypt and store your information now, click this link:

Save My Information

Recipient information

Donations coordinator:

Children's Advocacy Centers of

Mississippi

Contact email:

dunderwood@frcnms.org

Your Unconfirmed Address

Mailing information:

Kim Henderson 2941 Hwy 51 Canton, MS 39046

United States

Receipt Number: 5443-8468-7539-3928

Kim Henderson

From:

service@paypal.com

Sent:

Wednesday, April 08, 2015 1:41 PM

To:

Kim Henderson

Subject:

Receipt for your donation to Children's Advocacy Centers of Mississippi



This was in order to attend they pre-conference

Hello madison county sheriff's department,

This email confirms that you have donated Children's Advocacy Centers of Mississippi \$25.00 USD using PayPal.

This credit card transaction will appear on your bill as "PAYPAL *CHILDRENSAD".

Donation Details

Donation amount:

unt: \$25.00 USD

Total:

\$25.00 USD

Purpose:

Children's Advocacy Centers of

Mississippi

Reference:

website

Contributor:

madison county sheriff's

department

Recipient information

Donations coordinator:

Children's Advocacy Centers of

Mississippi

Contact email:

dunderwood@frcnms.org

Your Unconfirmed Address

Mailing information:

madison county sheriff's

department 2941 Hwy 51 Canton, MS 39046 United States

Receipt Number: 0441-1102-1389-9911

2600 W BEACH BLUD EDGEW

04/08/2015 18:49:00 MID: 000000002383596 TID: 03547938 345027665883

MC SALE

CARD: XXXXXXXXXXXX2655
INVOICE 0072
Batch #: 000918
APP Code: 00839Z
Entry Mode: Swiped
Mode: Online

PRE-TIP AMT \$19.33
TIP ----TOTAL -----

CUSTOMER COPY

PICCADILLY BILOX

O210 #Party 1 CHRISTINE & SvrCk: 80 6:49p 04/08/15 DINE IN

Angus Chop House Steak SIGNATURE LG

9.49
Carbonated Drink 2.29
Chopped Beef 6.29

Sub Total: 18.07 TAX : 1.26

04/08 6:49pTOTAL: 19.33

2600 W. Beach Boulevard &iloxi MS 39531 228-388-4826

TENT #: 0

Customer Copy El Saltillo 4 Edgewater

El Saltillo 2650 Beach Blvd Biloxi, MS 39532 (228) 388-1855

Current Batch 04072015 Tue 4/7/2015 10:06:31 PM Check 129-2 Table 14 Katlyn D.

Cardholder acknowledges receipt of goods and/or-services in the amount of the TOTAL shown hereon and agrees to perform the obligations set forth in the Cardholder agreement with the Issuer

MasterCard XXXXXXXXXXXX2655 Approval 00774Z

BASE

\$11.76

TIP

TOTAL

Customer Copy

Thank You and come again!