Purchasing Department

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

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

17 July 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 July 2015 general county 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:

General County MasterCard Renasant Bank for billing period 10 June 2015 – 10 July 2015.

Thank you,

Hardy Crunk

Purchasing Clerk

CREDIT CARD:

MASTERCARD

XXXX XXXX XXXX 2630

NUMBER: PERIOD:

10 JUNE 2015 - 10 JULY 2015

CARD USER

PURPOSE

DATE OF USE VENDOR NAME

AMOUNT

DESCRIPTION

ANDREW GRANT

LODGING

18-Jun-15

BEAU RIVAGE

\$353.02

SUPERVISORS CONVENTION

TOTAL CHARGES

TOTAL TO PAY

\$353.02

AMOUNT TO PAY

Hadylde July 11, 2015



MADISON BOARD SUPRVISRS1 Account Number: XXXX XXXX XXXX 2739

Billing Questions:

Website:

800-854-7642

www.24-7cardaccess.com

Send Billing Inquiries To:

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

THE EVERYWHERE CARD Credit Card Account Statement June 10, 2015 to July 10, 2015

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SOMMEN OF MOCCOUNT WO	
Previous Balance	\$5,258.05
- Payments	\$726.68
- Other Credits	\$0.00
+ Purchases	\$353.02
+ Cash Advances	\$0.00
+ Fees Charged	\$66.50
+ Interest Charged	\$45.24
= New Balance	\$4,996.13
Account Number	XXXX XXXX XXXX 2739
Credit Limit	\$20,000.00

PAYMENT INFORMATION

\$4,996.13 New Balance: \$125.00 Minimum Payment Due: August 4, 2015 Payment Due Date:

Credit Limit Available Credit Statement Closing Date Days in Billing Cycle

07/03

07/10

\$15,003.00 July 10, 2015

An amount followed by a minus sign (-) is a credit unless otherwise indicated. **TRANSACTIONS** Amount Post Tran Transaction Description Reference Number Date Date \$726.68-PAYMENT - THANK YOU 85421205Z00XTRAZT 07/09 07/09 \$353.02 BEAU RIVAGE HOTEL CASI BILOXI MS 55541865A03TYGPEX 06/18 06/18 FOLIO #000005477 CHECK-IN 06/16/15 \$27.50 ANNUAL CHARGE FOR 07/15 THROUGH 05/16

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

0002 JRH

07/03

07/10

150710 0

F1443005R000N4000

PAGE 1 of 2

LATE FEE

10 1443 0000 BS1 01AB5106 6770

THE EVERYWHERE CARD PO BOX 723847 ATLANTA GA 31139-0847

Account Number: New Balance:

XXXX XXXX XXXX 2739 \$4,996.13

Minimum Payment Due: Payment Due Date:

\$125.00 August 4, 2015

\$39.00

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 իլիգվունվերիցկաներինդիկներիանիկիցիկան 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.

MADISON BOARD SUPRVISRS1 6770 MADISON BOARD SUPERVISOR A207 PO BOX 608

CANTON MS 39046-0608

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547795007529273900012500004996130



MADISON BOARD SUPRVISRS1
Account Number: XXXX XXXX XXXX 2739

Type of Balance	Annual Percentage Rate	Balance Subject to	D
INTEREST CHARGE CALC	ULATION R) 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)	\$3,745.80	31	\$45.24
Cash Advances	20.49% (v)	\$0.00	31	\$0.00

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.

6770



Andrew Grant Po Box 608

Canton, MS 39046

ROOM#

: 04063

CONF#

: 749369804

ARRIVAL

: 06/16/15

DEPARTURE

: 06/18/15 Page 1 of 1

DATE	DESCRIPTION	CHARGES	CREDITS	

	Total	353.02	353.02
	XXXXXXXXXXX2739 XX/XX		
06/18/15	Mastercard		353.02
06/17/15	BR Resort Fee Tax	0.63	0.50.00
06/17/15	BR Resort Fee	9.00	
06/17/15	BR Room Tax - 12%	17.88	
06/17/15	BR Room	149.00	
06/16/15	BR Resort Fee Tax	0.63	
06/16/15	BR Resort Fee	9.00	
06/16/15	BR Room Tax - 12%	17.88	
06/16/15	BR Room	149.00	

0.00 **Balance**