

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

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

16 December 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 December 2015 general county credit card report on minutes and authorize payment of same.

Gentlemen:

Per statutory 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 November 2015 – 10 December 2015.

Thank you,


Hardy Crunk
Purchasing Clerk

CREDIT CARD REPORT

CREDIT CARD: MASTERCARD
NUMBER: XXXX XXXX XXXX 2739
PERIOD: 10 NOV 2015 - 10 DEC 2015

CARD USER	PURPOSE	DATE OF USE	VENDOR NAME	AMOUNT	DESCRIPTION
Jennifer Taylor	Lodging	4-Dec-15	Comfort Inn	\$194.24	Conference
TOTAL CHARGES				\$194.24	
AMOUNT TO PAY				\$194.24	

Hardy Crunk Dec 16 2015
Hardy Crunk
Purchase Clerk



MADISON BOARD SUPRVISRS1
Account Number: XXXX XXXX XXXX 2739

Billing Questions:
800-854-7642

Website:
www.24-7cardaccess.com

Send Billing Inquiries To:
P.O. Box 2988, Omaha, NE, 68103

THE EVERYWHERE CARD Credit Card Account Statement
November 10, 2015 to December 10, 2015

SUMMARY OF ACCOUNT ACTIVITY

Previous Balance	\$6,605.06
- Payments	\$1,699.46
- Other Credits	\$0.00
+ Purchases	\$194.24
+ Cash Advances	\$0.00
+ Fees Charged	\$0.00
+ Interest Charged	\$41.03
= New Balance	\$5,140.87

PAYMENT INFORMATION

New Balance:	\$5,140.87
Minimum Payment Due:	\$129.00
Payment Due Date:	January 4, 2016

Account Number	XXXX XXXX XXXX 2739
Credit Limit	\$20,000.00
Available Credit	\$14,859.00
Statement Closing Date	December 10, 2015
Days in Billing Cycle	31

MESSAGES

Privacy Notice - Federal law requires us to tell you how we collect, share, and protect your personal information. Our privacy policy has not changed and you may review our policy and practices with respect to your personal information at www.24-7cardaccess.com or we will mail you a free copy upon request if you call us at 1-800-854-7642.

TRANSACTIONS

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

Tran Date	Post Date	Reference Number	Transaction Description	Amount
11/20	11/20	8542120A700XTPPK4	PAYMENT - THANK YOU	\$1,699.46-
12/04	12/04	2524780AK0084QSKF	COMFORT SUITES STARKVI STARKVILLE MS	\$194.24
		CHECK-IN 12/03/15	FOLIO #0235089876	

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

5106 0001 JRH 001 7 5 151210 0

PAGE 1 of 2

10 1443 0000 BSI 01AB5106

5498

THE EVERYWHERE CARD
PO BOX 723847
ATLANTA GA 31139-0847



Account Number: XXXX XXXX XXXX 2739
New Balance: \$5,140.87
Minimum Payment Due: \$129.00
Payment Due Date: January 4, 2016

Please complete and enclose the bottom portion for proper credit.

Amount Enclosed: \$

194.24

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

MADISON BOARD SUPRVISRS1 5498
MADISON BOARD SUPERVISOR A212
PO BOX 608
CANTON MS 39046-0608



547795007529273900012900005140870



WELCOME, JENNIFER TAYLOR

Member Number: GP-JXT55037

Thank you for joining the program! Earn points with every stay. Redeem your points for great rewards. Save time every time you book with your saved preferences. Your new membership kit will arrive in 2-3 weeks.

RESERVATION CONFIRMATION

Your confirmation number is: **68987067**. We appreciate your business.

An email confirmation has been sent to: **HARDY@MADISON-CO.COM**

HOTEL

COMFORT SUITES

801 Russell St., Starkville, MS, 39759, US

Check-in:

Sunday, December 13, 2015(Check-in time: 3:00 PM)

Check-out:

Tuesday, December 15, 2015(Check-out time: 12:00 PM)

GUESTS

Guest: JENNIFER TAYLOR

Reservation Status: Reserved

Rate Program: Advance Purchase Rate

Payment Method:  MasterCard *****2739

ROOMS

1 King Bed, Suite, No Smoking

4 persons maximum occupancy

1 adult

Extra bed: None

December 13 - December 15 (2 nights)

Average nightly rate

\$89.10 USD

Advance Purchase Rate



BEST INTERNET
RATE GUARANTEE

Total:

\$178.20 USD

Estimated Taxes:
Estimated Total:

\$16.04 USD
\$194.24 USD

Estimated Grand Total:

\$194.24 USD

Additional Information: All Comfort Suites are smoke free. Pet accommodation: 75.00/stay Pet limit: 2 pets per room.

GUARANTEE POLICY

This is a pre-paid and non-cancellable rate plan. Once your reservation is confirmed, cancellations or changes are not allowed (including changes to the guest's information). No refunds or credits for early departure, cancellation or no-show. It requires full pre-payment for the entire stay and is fully non-refundable. Your credit card will be charged for the total amount within 24 - 48 hours of booking. The room(s) you have reserved will be held until 7:00 AM the morning following your scheduled arrival date.

WAYS TO MODIFY OR CANCEL YOUR RESERVATION

- > Through our Manage Reservations (/reservations/reservation-details/68987067) page
- > By calling the Reservation Center: 800-521-2121
- > By calling the hotel directly

