



4445 Willard Ave, Suite 1000
Chevy Chase, MD 20815
Return Service Requested

JEFFERSONTOWN OPCO LLC
NON-GOVERNMENT ACCOUNT
980 SYLVAN AVE
ENGLEWOOD CLIFFS NJ 07632-3315

Last statement: February 29, 2024
This statement: March 31, 2024
Total days in statement period: 31

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XXXXXX4230
(12)

Direct inquiries to:
888-855-7778

Forbright Bank
4445 Willard Ave, Suite 1000
Chevy Chase, MD 20815

AS OF FEBRUARY 9TH, 2024, WE UPDATED OUR TERMS AND CONDITIONS FOR TREASURY MANAGEMENT SERVICES(TMS). THE CURRENT AGREEMENTS THAT APPLY TO TMS ARE BEING REPLACED IN THEIR ENTIRETY. THE REVISED AGREEMENTS AND ADDENDA ARE AVAILABLE ON OUR WEBSITE AT WWW.FORBRIGHTBANK.COM/TMS/TERMS/ BY CONTINUING TO USE ANY TMS AFTER THE EFFECTIVE DATE, THE AMENDED TERMS AND CONDITIONS WILL GOVERN YOUR USE OF THE SERVICES.

Healthcare Analysis Checking

Account number	XXXXXX4230	Beginning balance	\$0.00
Enclosures	12	Total additions	184,306.69
Average balance	\$8,889.33	Total subtractions	184,306.69
Avg collected balance	\$8,889	Ending balance	\$.00

DEBITS

Date	Description	Subtractions
03-04	' Cash Mgmt Trsfr Dr REF 0640435L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	7,903.00
03-05	' Cash Mgmt Trsfr Dr REF 0650456L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	76,514.16
03-06	' Cash Mgmt Trsfr Dr REF 0660500L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	3,892.00
03-07	' Cash Mgmt Trsfr Dr REF 0670607L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	18,589.00

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Date	Description	Subtractions
03-08	' Cash Mgmt Trsfr Dr REF 0680452L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	7,739.00
03-12	' Cash Mgmt Trsfr Dr REF 0720455L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	6,568.00
03-15	' Cash Mgmt Trsfr Dr REF 0750554L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	1,388.23
03-18	' Cash Mgmt Trsfr Dr REF 0780552L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	5,606.00
03-21	' Cash Mgmt Trsfr Dr REF 0810455L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	9,252.02
03-25	' Cash Mgmt Trsfr Dr REF 0850713L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	35,884.34
03-26	' Cash Mgmt Trsfr Dr REF 0860455L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	7,726.94
03-28	' Cash Mgmt Trsfr Dr REF 0880650L FUNDS TRANSFER TO DEP XXXXXX4248 FROM	3,244.00

CREDITS

Date	Description	Additions
03-01	Remote Deposit	7,903.00
03-04	Remote Deposit	1,129.00
03-04	Remote Deposit	75,385.16
03-06	' Preauthorized Credit CAB FOR HEALTH PAYMENT 117153 THOMPSON,GE ORGEANN	590.00
03-06	' Preauthorized Credit CAB FOR HEALTH PAYMENT 119232 FELDHOFF,RI CHARD	1,041.00
03-06	' Preauthorized Credit CAB FOR HEALTH PAYMENT 118622 SCOTT,JOHN	2,261.00
03-06	Remote Deposit	18,589.00
03-07	Remote Deposit	7,739.00
03-11	Remote Deposit	6,568.00
03-15	' Preauthorized Credit HOSPARUS CREDIT AP AR PMT 240315	1,388.23
03-15	Remote Deposit	2,567.00
03-15	Remote Deposit	3,039.00
03-20	Remote Deposit	9,252.02
03-22	Remote Deposit	35,884.34

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Date	Description	Additions
03-25	Remote Deposit	7,726.94
03-27	Remote Deposit	1,000.00
03-28	' Preauthorized Credit	2,244.00
	WPS-TMEP CONTRAC HCCLAIMPMT 2503526231*1391268	
	299*WPSTDEFIC\	

DAILY BALANCES

Date	Amount	Date	Amount	Date	Amount
02-29	0.00	03-08	0.00	03-21	0.00
03-01	7,903.00	03-11	6,568.00	03-22	35,884.34
03-04	76,514.16	03-12	0.00	03-25	7,726.94
03-05	0.00	03-15	5,606.00	03-26	0.00
03-06	18,589.00	03-18	0.00	03-27	1,000.00
03-07	7,739.00	03-20	9,252.02	03-28	0.00

Thank you for banking with Forbright Bank

03/22/2024	Deposit	\$35,884.34
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REMOTE DEPOSIT TICKET

THANK YOU

Non Govt Jeffersontown OPCO

Deposit amount: 7726.94

⑆5011⑈3418⑆ 9010524230⑈4020 ⑆0000??2694⑆

03/25/2024 Deposit \$7,726.94

REMOTE DEPOSIT TICKET

THANK YOU

Non Govt Jeffersontown OPCO

Deposit amount: 1000.00

⑆5011⑈3418⑆ 9010524230⑈4020 ⑆0000100000⑆

03/27/2024 Deposit \$1,000.00

THE FOLLOWING DISCLOSURES APPLY TO CONSUMER ACCOUNTS ONLY

DEPOSIT ACCOUNT INFORMATION

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

Please call 240-380-1235 or write us at 4445 Willard Avenue Suite 1000 Chevy Chase, Maryland 20815 as soon as you can if you think your statement is wrong or if you need more information about a transfer or receipt. We must hear from you no later than sixty (60) days after we sent the FIRST statement on which the problem or error appeared.

1. Tell us your name and account number.
2. Tell us the dollar amount of the suspected error.
3. Describe the error or the transfer you are unsure about and explain as clearly as you can, why you believe it is an error or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than ten (10) business days to do this, we will credit your account for the amount you think is in error, so that you will have use of the money during the time it takes to complete our investigation.

LINE OF CREDIT INFORMATION

(Disregard if you do not have a Line of Credit)

DAILY BALANCE METHOD (including current transactions)

To get the daily balances we take the beginning balance of your Credit Line Account each day, add any new advances and subtract any payments or credits and any unpaid INTEREST CHARGES. This gives us the daily balance. Then, we multiply the daily balance each day of the statement period (excluding the last statement date but including the current statement date) by the appropriate daily periodic rates. We then add up all these daily interest charges to get your total interest charge. Daily periodic rates may vary.

IN CASE OF ERRORS OR INQUIRIES ABOUT YOUR BILL

If you think your bill is wrong, or if you need more information about a transaction on your bill, send your inquiry in writing, on a separate sheet, to 4445 Willard Avenue Suite 1000 Chevy Chase, Maryland 20815 as soon as possible. We must hear from you no later than 60 days after the bill was mailed to you. You can telephone us, but doing so will not preserve your rights. In your letter give us the following information.

1. Your name and account number
2. The dollar amount of the suspected error, and
3. A description of the error and why (to the extent you can explain) you believe it is an error. If you need some more information, describe the item you are unsure about.

If you have authorized the Bank to automatically pay your bill from your checking or savings account, you can stop payment on any amount you think is wrong by mailing your notices so that the Bank receives it three (3) business days before the payment is scheduled to occur.

You remain obligated to pay the parts of your bills not in dispute, but you do not have to pay any amount in dispute during the time the Bank is resolving the dispute. During that same time, the Bank may not take action to collect disputed amounts or report disputed amounts as delinquent.