





Page: 1 of 1

Statements Dates 06/01/2024 - 06/30/2024

Account Number: 46727239

Images:

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1 100000 001
CLARKSVILLE SNF LLC
GOVERNMENTAL ACCOUNT
368 NEW HEMPSTEAD RD 309
NEW CITY NY 10956

# VISIT HANCOCKWHITNEY.COM TO ENROLL IN ONLINE BANKING WITH ESTATEMENTS. CALL US AT 800-448-8812.

## **Checking Account Summary**

| PREVIOUS BALANCE                    | .00       | AVERAGE BALANCE   |
|-------------------------------------|-----------|-------------------|
| + 3 CREDITS                         | 28,647.46 | .00               |
| - 3 DEBITS                          | 28,647.46 | YTD INTEREST PAID |
| <ul> <li>SERVICE CHARGES</li> </ul> | .00       | .00               |
| + INTEREST PAID                     | .00       |                   |
| ENDING BALANCE                      | .00       |                   |

\* \* \* \* \* \* \* \* CHECKING ACCOUNT TRANSACTIONS \* \* \* \* \* \* \* \*

## Deposits and Other Credits

| Date        | Amount    | t Descripti     | ion                     | Date  | Amount    | Descripti  | on               |
|-------------|-----------|-----------------|-------------------------|-------|-----------|------------|------------------|
| 06/13       | 549.44    | <b>PAYABLES</b> | <b>CURO HEALTH SERV</b> |       |           | 0241700090 | 67777CCD         |
| KVXXXXX     |           | 0241650078      | 378577CCD               | 06/21 | 17,349.70 | PAYABLES   | CURO HEALTH SERV |
| 10000 06/18 | 10,748.32 | PAYABLES        | CURO HEALTH SERV        |       |           | 0241730100 | 01266CCD         |
| 10000       |           |                 |                         |       |           |            |                  |

#### Other Debits

| Date  | Amount      | Description              | Date  | Amount      | Description              |
|-------|-------------|--------------------------|-------|-------------|--------------------------|
| 06/13 | 549.44      | TRNSFR DEBIT             |       | ZBA XFER TO | CHECKING ACCT 0046727220 |
|       | ZBA XFER TO | CHECKING ACCT 0046727220 | 06/21 | 17,349.70   | TRNSFR DEBIT             |
| 06/18 | 10,748.32   | TRNSFR DEBIT             |       | ZBA XFER TO | CHECKING ACCT 0046727220 |

### • Balance By Date

| Date  | Balance | Date  | Balance | Date | Balance |
|-------|---------|-------|---------|------|---------|
| 05/31 | .00     | 06/18 | .00     |      |         |
| 06/13 | .00     | 06/21 | .00     |      |         |

In case of errors or questions about your electronic transfers, telephone or write us at the address listed as soon as you can if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we send you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number (if any).
- 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.
- 3. Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 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 us to complete our investigation.

Hancock Whitney Attn: Deposit Services P.O. Box 4019 Gulfport, MS 39502 1-800-448-8812

#### Notice About Electronic Check Conversion

When you provide a check payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.

#### Handyline Information

Interest Charges: Interest Charges have been computed on your Handyline Account by applying each Daily Periodic Rate disclosed on the face of this statement to the Daily Balance of your Account over the current billing cycle, and then multiplying the resulting product by the number of days in the billing cycle. The Daily Balance of your Account has been computed by totaling the "Closing Principal Balance" of your Account for each day of your billing cycle and dividing the resulting total by the number of days in the billing cycle.

The closing Principal Balance of your Account for each day of the billing cycle was computed by taking into consideration payments, credits, loan advances and other debits posted to your Account over the billing cycle, but disregarding any unpaid interest Charges. Interest Charges have been assessed on new loans and other debits under your Account from date of posting, and there is not a time period within which payments may be made in order to completely avoid interest Charges.

Provided you have not made at least the minimum payment due within fourteen days of the statement date:

- 1. If you have an unsecured Handyline Account, your checking account has been charged with a minimum payment equal to 1/20<sup>th</sup> of the disclosed New Balance on the face of this statement (less any amount disputed by you), or \$25.00, whichever is greater. If the New Balance of your Account was less than \$25.00, your checking account has been charged for the entire New Balance (less any amount disputed by you).
- 2. If you have a secured Handyline Account, your checking account has been charged with a minimum payment equal to 1/50<sup>th</sup> of the disclosed New Balance on the face of this statement (less any amount disputed by you), or \$100.00, whichever is greater. If the New Balance of your Account was less than \$100.00, your checking account has been charged for the entire New Balance (less any amount disputed by you).

You have the option to make additional payments in excess of the minimum payment on your Handyline Account in any amount and at any time, thus reducing your exposure to additional Interest Charges. Payments should be mailed to: Lending Services, P.O. Box 4020, Gulfport, MS 39502, Attn: Handyline. Payments we receive at the above address by 10:00 A.M. will be credited to your Handyline Account as of the date of receipt. Handyline payments made at other bank locations will be promptly credited to your Account, but in no event longer than five (5) days after receipt.

What ToDolf You Think You Find A Mistake On Your Statement

If you think there is an error on your statement, write to us at Hancock Whitney Lending Services, P.O. Box 4019, Gulfport, MS 39502-0420 and include the following information:

- Account information: Your name and account number.
- Dollar amount: The dollar amount of suspected error.
- Description of Problem: If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement. You must notify us of any potential errors in writing. Hancock Whitney clients may call us at 1-800-448-8812, but if you do, we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

#### THIS FORM IS PROVIDED TO HELP YOU BALANCE YOUR BANK STATEMENT

|                              | K / DEBIT TRANSACTIONS OUTSTAN<br>our account as of statement date) | DINGTHISMONTH  |   | BANKBALANCEASSHOWN  |  |
|------------------------------|---|--|---|---|--|
| Check#or<br>Transaction Type | \$  | ONTHISSTATEMENT  |   | ONTHISSTATEMENT   | \$   |
|                              |   | Deposits Not Credited In<br>This Statement Cycle<br>(If Any) |   | \$  |  |
|                              |   |  |   |   |  |
|                              |   |  |   | AddTotalofDepositsNotCredited   | +\$  |
|                              |   |  |   | Subtract Total Outstanding<br>Checks/Debits                             | -\$  |
|                              |   |  |   | BALANCE   | =\$  |
|                              |   |  |   | Thisbalanceshouldagreewithyourcheckbookb shownonyourstatementthismonth. | alance.Remembertodeduct servicecharges/fees(ifan |
|                              |   |  |   |   |  |
|                              |   | <b></b> .  |   |   |  |
| TOTAL                        |   |  | 7 |   |  |