

Credit Card Statement

Name: Abraham Swearegin
Address: United States, California,
San Mateo, 9920 BridgePointe Parkway,
Account Number: 12345-67-8901

For Lost or Stolen Card, Call:
1-800-XXX-XXXX

Payment Information

Date: 10/15/XX
Payment Due Date: 11/5/XX
New Balance: \$2402.00
Minimum Payment: \$50

Account Summary		Payment Information	
Previous Balance	\$1200.00	New Balance	\$2402.00
Payment, Credits	-\$200.00	Payment Due Date	11/5/XX
Purchases	\$1500.00	Minimum Payment Due	\$50
Cash Advances	\$100.00		
Fees Charged	\$0		
Interest Charged	\$2.00		
New Balance	\$2402.00		

Account Summary	Payment Information
Opening/Closing Date	9/15/XX – 10/14/XX
Credit Access Line	\$15,000.00
Available Credit	\$10,000.00
Cash Access Line	\$2,000
Available for Cash	\$2,000
Previous Due Amount	\$0
Balance Over the Credit Access Line	\$0

Finance Charge Summary	Purchases	Advances
Periodic Rate	1.05%	0.73%
Annual Percentage Rate (APR)	12.05%	5.25%