



Bank of America **Business Advantage**  
Customized Cash Rewards

OAKERDS LLC  
5474 1516 2836 **9271**  
September 12, 2025 - October 11, 2025

Company Statement

**Account Information:**  
www.bankofamerica.com

**Mail Billing Inquiries to:**  
BANK OF AMERICA  
PO BOX 660441  
DALLAS, TX 75266-0441

**Mail Payments to:**  
BUSINESS CARD  
PO BOX 15796  
WILMINGTON, DE 19886-5796

**Customer Service:**  
1.800.673.1044, 24 Hours

**Outside the U.S.:**  
1.509.353.6656, 24 Hours

**For Lost or Stolen Card:**  
1.800.673.1044, 24 Hours

**Business Offers:**  
www.bankofamerica.com/mybusinesscenter

**Payment Information**

New Balance Total ..... \$20,107.42  
Past Due Amount ..... \$461.49  
**Minimum Payment Due ..... \$1,103.28**  
**Payment Due Date ..... 11/06/25**

**Late Payment Warning:** If we do not receive your minimum payment by the date listed above. You may have to pay a fee based on the outstanding balance on the fee assessment date:  
\$0.00 for balance less than \$100.01  
\$29.00 for balance less than \$1,000.01  
\$39.00 for balance less than \$5,000.01  
\$49.00 for balance equal to or greater than \$5,000.01

**Minimum Payment Warning:** If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance.

**Account Summary**

Previous Balance ..... \$19,662.75  
Payments and Other Credits ..... \$0.00  
Balance Transfer Activity ..... \$0.00  
Cash Advance Activity ..... \$0.00  
Purchases and Other Charges ..... \$0.00  
**Fees Charged ..... \$49.00**  
**Finance Charge ..... \$395.67**  
New Balance Total ..... \$20,107.42

Credit Limit ..... \$13,000  
Credit Available ..... \$0.00  
Statement Closing Date ..... 10/11/25  
Days in Billing Cycle ..... 30

**Transactions**

Posting Date	Transaction Date	Description	Reference Number	Amount
<b>OAKERDS LLC</b>				
<b>Account Number: 9271</b>				
		<b>Fees Charged</b>		
10/08	10/08	LATE PAYMENT FEE		49.00
		<b>TOTAL FEES FOR THIS PERIOD</b>		<b>\$49.00</b>
		<b>Finance Charge</b>		
10/10	10/10	PURCHASE *FINANCE CHARGE*		395.67
		<b>TOTAL FINANCE CHARGE FOR THIS PERIOD</b>		<b>\$395.67</b>

0005390 0110328 2010742 5474151628369271

BUSINESS CARD  
PO BOX 15796  
WILMINGTON, DE 19886-5796

OAKERDS LLC  
PO BOX 421877  
ATLANTA, GA 30342-8877

Account Number: 5474 1516 2836 **9271**  
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New Balance Total ..... \$20,107.42  
**Minimum Payment Due ..... \$1,103.28**  
**Payment Due Date ..... 11/06/25**

**Enter payment amount**

\$

For change of address/phone number, see reverse side.

Mail this coupon along with your check payable to:  
**BUSINESS CARD,**  
or make your payment online at  
www.bankofamerica.com

**CUSTOMER STATEMENT OF DISPUTED ITEM** (You must use a separate form for each dispute. Please print.)

If you believe a transaction on your statement is an error, complete and sign a copy of this form using blue or black ink, or write a detailed letter on a separate sheet of paper. Then return it to: **PO BOX 53101, PHOENIX, AZ 85072-3101** no later than 60 days after we sent you the first bill on which the transaction or error appeared. If you prefer to speak with a representative about your dispute, please call **1.866.601.4410, 8am-8pm Est.** You do not have to pay any amount in question while we are investigating, but you are obligated to pay the parts of your bill that are not in question.

PLEASE DO NOT ALTER WORDING ON THIS FORM OR MAIL YOUR LETTER WITH YOUR PAYMENT. Provide copies of all documentation that will help us investigate your dispute (e.g. contracts, invoices, detailed letter, sales slips, return receipts, or second opinions).

Your Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Posting Date: \_\_\_\_\_ Transaction Date: \_\_\_\_\_ Reference Number: \_\_\_\_\_  
Amount: \_\_\_\_\_ Disputed Amount: \_\_\_\_\_ Merchant Name: \_\_\_\_\_

Below tell us why you think the item noted above is in error. **Check one box only.**

- ☐ 1. I certify that I do not recognize the transaction. I have attempted to contact the merchant to verify this transaction.
- ☐ 2. I certify that the charge listed above was not made by me or a person authorized by me to use my card, nor were the goods or services represented by the transaction received by me or authorized by me.
- ☐ 3. Although I did engage in a transaction with this merchant, I was billed for \_\_\_\_\_ transaction(s) totaling \$ \_\_\_\_\_. that I did not engage in. I have my card in my possession. If available, enclose a copy of the sales slip for the valid charge.
- ☐ 4. I have not received the merchandise that was to be shipped to me on \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY). I have asked the merchant to credit my account.
- ☐ 5. Merchandise shipped to me was not as described. Please explain in detail and if applicable provide proof of return.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- ☐ 6. Merchandise shipped to me arrived damaged and/or defective.  
I returned it on \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY) and asked the merchant to credit my account. Please provide proof of return and describe how the merchandise was damaged and/or defective.
- \_\_\_\_\_
- \_\_\_\_\_
- ☐ 7. Although I did engage in the above transaction, I dispute the entire charge or a portion in the amount of \$ \_\_\_\_\_. I have contacted the merchant, returned the merchandise on \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY) and requested a credit adjustment. I am disputing this charge because \_\_\_\_\_
- Please supply proof of return or if unable to return merchandise please explain.
- \_\_\_\_\_
- ☐ 8. I notified the merchant on \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY) to cancel the preauthorized order or reservation. Please note cancellation # and if available, enclose a copy of your telephone bill showing date and time of cancellation. Reason for cancellation: \_\_\_\_\_
- \_\_\_\_\_
- ☐ 9. Although I did engage in the above transaction, I have contacted the merchant for credit. The services to be provided on \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY) were not received. Please describe the services to be received and explain the merchants failure to provide the services.
- \_\_\_\_\_
- ☐ 10. I was issued a credit slip that was not shown on my statement. **A copy of my credit slip is enclosed. If the merchant has agreed to issue a credit, be advised the merchant has up to 30 days to supply this credit to your account.**
- ☐ 11. The amount of the charge was increased from \$ \_\_\_\_\_ to \$ \_\_\_\_\_ or my sales slip was added incorrectly.  
**Enclosed is a copy of the sales slip that shows the correct amount.**
- ☐ 12. Other: Please explain \_\_\_\_\_
- \_\_\_\_\_

Merchants often provide telephone numbers with their names on your billing statement. If you do not recognize a transaction, attempt first to contact the merchant for transaction information.

Cardholder Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_  
Home Telephone: (\_\_\_\_) \_\_\_\_\_ Business Telephone: (\_\_\_\_) \_\_\_\_\_

PLEASE KEEP A COPY OF BOTH SIDES OF THIS STATEMENT FOR YOUR RECORDS

**PAYMENTS**

We credit a payment as of the date we receive it if the payment is: 1) received by 5:00 p.m. (Eastern Time) Monday through Friday (except legal holidays). 2) received at the payment address indicated on the front of this statement. 3) paid with a check drawn in U.S. dollars on a U.S. financial institution or a U.S. dollar money order, and 4) sent in the return envelope with only the bottom portion of your statement accompanying it. Payments received after 5:00 p.m. (Eastern Time) Friday, but that otherwise meet the above requirements, will be processed on the next business day, which is usually the following Monday. Saturdays, Sundays, and holidays are not business days. Credit for payments received in any other manner may be delayed up to five business days, during which time finance charges, if applicable will continue to accrue. We will reject any payments that are not drawn in U.S. dollars and those drawn on a financial institution located outside of the United States. Please do not send cash, credit cards, correspondence, staples or paper clips with your payment. Mail your payment at least 7 days in advance of the payment due date to ensure timely delivery.

**CUSTOMER CORRESPONDENCE**

If you prefer to send a written inquiry regarding your account, please send the request to: **BANK OF AMERICA, PO BOX 660441, DALLAS, TX, 75266-0441, USA.** This address should not be utilized to dispute merchant transactions appearing on your billing statement. Please see the paragraph above for instructions regarding dispute procedures.

For address/phone number changes on all accounts in your program, have the authorized contact make a request at **WWW.BANKOFAMERICA.COM**

Finance Charge Calculation

Your **Annual Percentage Rate (APR)** is the annual interest rate on your account.

	Annual Percentage Rate	Balance Subject to Interest Rate	Finance Charges by Transaction Type
PURCHASES	24.24% V	\$19,859.76	\$395.67
CASH	28.24% V	\$0.00	\$0.00

V = Variable Rate (rate may vary), Promotional Balance = APR for limited time on specified transactions.

Reward Summary

Beginning Balance	108.47	Other Bonuses	.00
Earned	2.03		
Redeemed	110.50		
Adjustments	.00	Ending Balance	.00

Visit [bankofamerica.com/business](https://bankofamerica.com/business) to review your available rewards balance and redemption options.

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