

JPC-26-01825-41  
CAUSE NO. \_\_\_\_\_

MIDLAND CREDIT MANAGEMENT, INC.  
Plaintiff,

vs.

GABRIEL CRUZ  
Defendant

IN THE JUSTICE COURT  
PRECINCT 4 PLACE 1  
DALLAS COUNTY, TEXAS

**PLAINTIFF'S ORIGINAL PETITION**

**TO THE HONORABLE COURT:**

MIDLAND CREDIT MANAGEMENT, INC., the Plaintiff, complains of GABRIEL CRUZ, the Defendant, and for cause of action shows:

**Discovery Level**

1. Plaintiff reserves the right to petition this Court to engage in pretrial discovery pursuant to Rule 500.8 of the Texas Rules of Civil Procedure.

**Parties and Service of Citation**

2. The Plaintiff is a foreign limited liability company duly authorized to conduct business in the State of Texas.

3. The Defendant resides within the venue of the above referenced court and may be served at the following address, or wherever the Defendant may be found:

GABRIEL CRUZ  
912 NORA LN  
DESOTO, TX 75115-5464

**Venue and Jurisdiction; Relief Sought**

4. Venue is proper in this county because Defendant, a natural person, resides in this county. The amount in controversy is within the jurisdictional limit of this court. The Plaintiff seeks only monetary relief of \$20,000.00 or less, including damages of any kind, penalties, cost, expenses if any. Plaintiff does not seek pre-judgment interest or attorney's fees.

**Plaintiffs Efforts To Resolve  
The Underlying Obligation**

5. Plaintiff, MIDLAND CREDIT MANAGEMENT, INC., owns portfolios of consumer receivables, which it attempts to collect. When working with individual consumers, Plaintiff, MIDLAND CREDIT MANAGEMENT, INC., and its affiliates (collectively, "Plaintiff") generally attempt to contact consumers like Defendant through several means, all in an effort to establish contact and to resolve the underlying

obligation. In doing so, Plaintiff attempts to assess each consumer's willingness to pay, through phone calls, letters or other means. Plaintiff attempts to exclude consumers from its collection efforts, where Plaintiff believes those consumers are facing extenuating circumstances or hardships that would prevent them from making any payments.

6. When Plaintiff contacts consumers, it strives to treat consumers with respect, compassion and integrity. Plaintiff works with consumers in an effort to find mutually-beneficial solutions, often offering discounts, hardship plans, and payment options. Plaintiff's efforts are aimed at working with consumers to repay their obligations and to attain financial recovery. Plaintiff strives to engage in dialogue that is honorable and constructive, and to play a positive role in consumers' lives.

7. Despite Plaintiff's efforts to reach consumers and resolve the consumer's obligations, only a percentage of consumers choose to engage with Plaintiff. Those who do are often offered discounts or payment plans that are intended to suit their needs. Plaintiff would prefer to work with consumers to establish voluntary payment arrangements resulting in the resolution of any underlying obligations. However, the majority of Plaintiff's consumers ignore calls or letters, and some simply refuse to repay their obligations despite an apparent ability to do so. When this happens, Plaintiff must decide then whether to pursue collection through legal channels, including litigation like the present action against Defendant. Although the account is now in litigation, Plaintiff remains willing to explore a mutually-beneficial solution through voluntary payment arrangements, if possible.

### **Count I**

8. Defendant had an account with SYNCHRONY BANK. Plaintiff purchased Defendant's debt on or about August 23, 2024. Plaintiff has been assigned the debt, and Plaintiff is now owed money from Defendant. MIDLAND CREDIT MANAGEMENT, INC. is the current owner of the debt, and any prior holders of the debt are listed in the attached Affidavit Relating to Damages and Business Records and are incorporated by reference.

Relevant information related to the account is as follows:

ORIGINAL CREDITOR:	SYNCHRONY BANK
ACCOUNT NO.:	XXXXXXXXXXXX-0205
DATE OF CHARGE-OFF:	May 31, 2023
CHARGE-OFF BALANCE:	\$1,767.95
DATE OF ORIGINATION:	August 27, 2019

Account Stated

9. Plaintiff is the owner and beneficiary of all claims related to the account opened by Defendant with Plaintiff's predecessor-in-interest. Thus, Plaintiff is entitled to relief under the common law cause of action account stated because (i) transactions between the parties or their predecessors-in-interest gave rise to indebtedness of the Defendant to the Plaintiff (ii) there existed an agreement, express or implied, between the parties establishing a fixed amount due, and (iii) the Defendant made a promise, express or implied, to pay the indebtedness, but has failed to do so.

10. Demand for payment has been made by Plaintiff, and as of December 19, 2025, Defendant has refused and failed to remit the remaining principal amount of \$1,767.95. No interest (0%) is accruing on the account.

#### **Damages**

11. Plaintiff seeks liquidated damages in the amount of \$1,767.95 along with post judgment interest at the statutory rate provided by applicable law.

#### **Conditions Precedent**

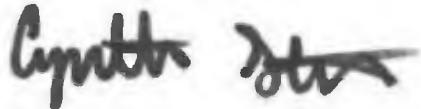
12. All conditions precedent have been performed, have occurred, or should be excused.

#### **Prayer**

For these reasons, Plaintiff asks that Defendant be cited to appear and answer, and that Plaintiff have judgment against Defendant for the following:

- a. Actual damages in the amount of \$1,767.95;
- b. All costs of suit; and
- c. All other relief, in law and equity, to which Plaintiff may be entitled.

Respectfully submitted  
MIDLAND CREDIT MANAGEMENT, INC.



Cynthia Stevens

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Brian Staley, Texas Bar No. 00797483  
Michael Young, Texas Bar No. 24037759  
Peter Newman, Texas Bar No. 24106928  
Juan Goenaga, Texas Bar No. 00797868  
Cynthia Stevens, Texas Bar No. 24129749  
Genail Logan, Texas Bar No. 24117754  
Sunny Park, Texas Bar No. 24149285  
John Gillespie, Texas Bar No. 07926300  
Amanda Okoli, Texas Bar No. 24140904  
Eliel Escobedo Jr., Texas Bar No. 24124860  
David D. Backer, Texas Bar No. 24128895  
Kristy Gabrielova, Texas Bar No. 24042929  
Attorneys for MIDLAND CREDIT MANAGEMENT,  
INC.  
P.O. Box 460568  
Houston, TX 77056  
Tel: (866) 300-8750  
Fax: 877-232-9721  
Email: InternalLegal-TexasFax@MCMCG.COM

PLEASE UNDERSTAND THIS COMMUNICATION IS FROM A DEBT COLLECTOR. THIS IS AN ATTEMPT TO COLLECT A DEBT. ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.

You can view documents related to your account by visiting our website at [www.midlandcredit.com](http://www.midlandcredit.com) and logging into your account.

# **EXHIBIT A**

 **synchrony**  
965 Keller Rd  
Altamonte Springs, FL 32714

## BILL of SALE

### Midland (S2FSMIDS) – PSCC 180 MP – August 2024

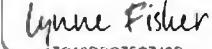
Transfer Date: 8/17/2024

For value received and in further consideration of the mutual covenants and conditions set forth in the Master Account Sale Agreement (the "Agreement"), dated as of this 13<sup>th</sup> day of February, 2023 by and between Synchrony Bank formerly known as GE Capital Retail Bank; RFS Holding, L.L.C., Synchrony Card Funding, LLC, and Retail Finance Credit Services, LLC (collectively "Seller") and Midland Credit Management, Inc. ("Buyer"), Seller hereby transfers, sells, conveys, grants, and delivers to Buyer, its successors and assigns, without recourse except as set forth in the Agreement, the Accounts as set forth in the Notification File (as defined in the Agreement and Account Addendum dated 8/6/2024) named IC\_S2FSMIDS\_DMPLA\_DebtManager-20240818052643340549000-431049-PLCMNT-EXPORT.xml.gz, delivered by Seller to Buyer on or about the 17<sup>th</sup> of August, 2024, and as further described in the Agreement.

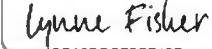
Capitalized terms not defined herein shall have the definition ascribed in the Agreement.

With respect to information for the Accounts summarized in the Notification Files, the Seller represents and warrants to Buyer that (i) the Account information constitutes the Seller's own business records and accurately reflects in all material respects the information in the Seller's database; (ii) the Account information was kept in the regular course of business; (iii) the Account information was made at or near the time by, or from information transmitted by, a person with knowledge of the data entered into and maintained in the Account's database; and (iv) it is the regular practice of the Seller's business to maintain and compile such data.

**Synchrony Bank**  
Signed by:

By:  8/28/2024  
Lynne Fisher  
SVP Recovery Operations

**RFS Holding, L.L.C.**  
Signed by:

By:  8/28/2024  
Lynne Fisher  
Duly Authorized Signatory

**Midl**  
Signed by:

By:  nt, Inc.  
Danielle Wohlfahrt  
Managing Vice President,  
Business Development & Strategic Partnerships

**Synchrony Card Funding, LLC**  
Signed by:

By:  8/28/2024  
Lynne Fisher  
Duly Authorized Signatory

**Retail Finance Credit Services, LLC**  
Signed by:

By:  8/28/2024  
Lynne Fisher  
Vice President

**QC APPROVED**

By: Sushila Pradhan

Date: 8/28/2024

Purchase Price Reconciliation/Funding Instructions

August 12, 2024

To: **Midland**

THIS ACCOUNT SALE ADDENDUM (the "Addendum") is entered into this 6th day of August, 2024 by and among Synchrony Bank formerly known as GE Capital Retail Bank; RFS Holding, LLC, Synchrony Card Funding, LLC and Retail Finance Credit Services, LLC, ("Seller") and Midland Credit Management, Inc. ("Buyer"). Hereinafter Seller and Buyer are each referred to as a "party" and collectively, as the "parties", for themselves and their respective successors and permitted assigns.

Portfolio	<u>Debt Manager</u>
Agcy_Atty Code	<u>S2FSMIDS</u>
Total Number of Accounts	[REDACTED]
Outstanding Balances on Transfer Date:	[REDACTED]
Cut-Off Date	<u>August 17, 2024</u>
Transfer Date	<u>August 17, 2024</u>
Purchase Price Factor	[REDACTED]
Purchase Price	[REDACTED]
0% Holdout	[REDACTED]
Amount of Wire transfer	[REDACTED]
Date of Funding (no later than):	<u>August 23, 2024</u>
Wire Date:	<u>August 23, 2024</u>
Bank:	[REDACTED]
ABA No.	[REDACTED]
Account No:	[REDACTED]
Account Holder:	[REDACTED]
Location:	[REDACTED]

**AFFIDAVIT OF SALE  
OF ACCOUNT  
BY ORIGINAL CREDITOR**

State of Florida County of Seminole

**Alexa Stubbs** being duly sworn, deposes and says:

I am over 18 and not a party of this action. I am a Media Representative of Synchrony Bank formerly known as GE Capital Retail Bank. In that position I have access to creditor's books and records, and am aware of the process of the sale and assignment of electronically stored business records.

On or about 8/17/2024 Synchrony Bank formerly known as GE Capital Retail Bank sold a pool of charge-off accounts (the Accounts) by a Purchase and Sale Agreement and a Bill of Sale to **Midland Credit Management, Inc.** As part of the sale of the Accounts, electronic records and other records were transferred on individual Accounts to the debt buyer. These records were kept in the ordinary course of business of Synchrony Bank formerly known as GE Capital Retail Bank.

The Creditor has a process to detect and correct errors on these accounts. The above statements are true to the best of my knowledge.

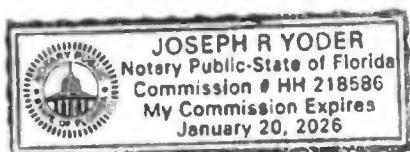
Signed this 10th day of September, 2024



Alexa Stubbs

Signed and sworn to before me this 10th day of September, 2024

(Notary Stamp)



**NY CoC CERTIFICATE OF CONFORMITY UNDER  
NYS CLS CPLR § 2309(c) AND NYS CLS RPL § 299-a**

The undersigned does hereby certify that he/she is an attorney-at-law duly admitted to practice in the State of Florida and residing in the State of Florida; that he/she is a person duly qualified to make this certificate of conformity pursuant to Section 299-a of the Real Property Law of the State of New York; that he/she is fully acquainted with the laws of the State of Florida pertaining to the acknowledgment or proof of affidavits; that the acknowledgement or proof upon the foregoing **Affidavit of Alexa Stubbs** was taken by **Joseph Yoder**, a notary public in the State of Florida, in the manner prescribed by the laws of the State of Florida, being the state in which the Affidavit was taken; and, based on his/her review thereof, that the notarized Affidavit conforms to the laws of the State of Florida in all respects.

Witness my signature this 10th day of September, 2024



**Tyler Burich**

Attorney-at-law, State of Florida.

Field	Field Data
Account Number	[REDACTED] 0205
First Name	GABRIEL
Last Name	CRUZ
SSN	XXX-XX-0199
Date of Birth	[REDACTED]
Address 1	480 COMMONS DR APT 2120
City	BURLESON
State	TX
Zip	76028
Open Date	08/27/2019
Last Purchase Date	08/28/2019
Last Purchase Amount	\$1,500.00
Last Payment Date	10/27/2022
Last Payment Amount	\$263.00
Sale Amount	\$1,767.95
Charge Off Date	05/31/2023
Charge off Balance	\$1,767.95
Post Charge Off Interest	\$0.00
Post Charge off Fee	\$0.00
Post Charge off Payments	\$0.00
Post Charge off Payments and Credits	\$0.00
Post Charge off Credits	\$0.00
Affinity	CARECREDIT

Account information provided by Synchrony Bank formerly known as GE Capital Retail Bank pursuant to the Bill of Sale/Assignment of Accounts transferred on or about 08/23/2024 in connection with the sale of accounts from Synchrony Bank formerly known as GE Capital Retail Bank to Midland Credit Management, Inc.

# **EXHIBIT B**

STATE OF TEXAS

Midland Credit Management, Inc.,

Plaintiff

-vs-

AFFIDAVIT OF LINDA WOLFE

GABRIEL CRUZ,

Defendant(s).

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Linda Wolfe, whose business address is 600 W. Saint Germain St Suite 200, St. Cloud, MN 56301-3616, certifies and says:

1. I am employed as a Legal Specialist and have access to pertinent account records for Midland Credit Management, Inc. ("Plaintiff" or "MCM"). I am a competent person over eighteen years of age, and make the statements herein based upon personal knowledge of those account records maintained by Plaintiff. Plaintiff is the current owner of, and was assigned all the rights, title and interest to Defendant's SYNCHRONY BANK/CARECREDIT account XXXXXXXXXXXXXXX0205 (MCM Number 328642398) (hereinafter "the Account").
2. I have access to and have reviewed the electronic records pertaining to the Account maintained by MCM and am authorized to make this affidavit on MCM's behalf. The electronic records reviewed consist of (i) data and records acquired from the seller or assignor when MCM purchased or was assigned the Account, which were incorporated into MCM's business records upon purchase or assignment, and (ii) data and records generated by MCM in connection with servicing the Account since the date the Account was purchased by or was assigned to MCM. In addition, I reviewed the documents that are attached to this affidavit.
3. I am familiar with and trained on the manner and method by which MCM creates and maintains its business records pertaining to the Account, which consist of (i) data and documents acquired from the seller or assignor, and (ii) subsequent collection and/or servicing activities by MCM. The records are acquired or created, and are kept in the regular course of MCM's business. It was in the regular course of MCM's business for a person with knowledge

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AFFIDAVIT OF LINDA WOLFE - 1



328642398



AFFRECATTACH



25-429773

of the subsequent collection and/or servicing activities recorded, and a business duty to report, to make the record or data compilation, or to transmit information thereof to be included in such record, or for such information to be posted in MCM's records by a computer or similar digital means. In the regular course of MCM's business, the record or compilation of the subsequent collection activities is made at or near the time of the act or event by MCM as a regular practice.

4. The accuracy of such records is relied upon by Plaintiff in collecting this Account. These records are trustworthy and relied upon because the original creditor was required to keep careful records of the Account at issue in this case as required by law and/or suffer business loss.

5. MCM's records show that the Account was charged off on 2023-05-31 with a balance of \$1,767.95. On or about 2024-08-23, Plaintiff purchased and was assigned the Account with a balance owed by Defendant of \$1,767.95. As of 2025-12-21, MCM's records show that the balance of \$1,767.95 remains due and owing and no interest has been assessed to the Account. Therefore, Plaintiff seeks the amount of \$1,767.95 from Defendant. All credits and offsets for payments have been applied to the balance.

6. The complete chain of title including SYNCHRONY BANK, the original creditor, and all post-charge-off purchasers/assignees of the debt are as follows:

1. SYNCHRONY BANK

2024-08-23

2. Midland Credit Management, Inc.

7. Based upon my review, attached hereto are records regarding the Account being a reproduction from Plaintiff's records. The documents attached hereto, are true and correct copies of the originals, except to the extent that confidential and privileged information is omitted or redacted and personal identifying information is omitted or redacted as required by local rules, and applicable state and federal law.

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AFFIDAVIT OF LINDA WOLFE - 2



328642398



AFFRECATTACH



25-429773

I certify under penalty of perjury that the foregoing statements are true and correct.

JAN 15 2026

Date



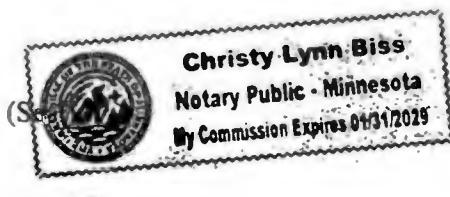
Linda Wolfe

STATE OF MINNESOTA

COUNTY OF STEARNS

JAN 15 2026

Signed and sworn to (or affirmed) before me on \_\_\_\_\_  
by Linda Wolfe.



Notary Public

CA137

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AFFIDAVIT OF LINDA WOLFE - 3



328642398



AFFRECATTACH



25-429773

**synchrony**  
965 Keller Rd  
Altamonte Springs, FL 32714

## BILL of SALE

### Midland (S2FSMIDS) – PSCC 180 MP – August 2024

Transfer Date: 8/17/2024

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Capitalized terms not defined herein shall have the definition ascribed in the Agreement.

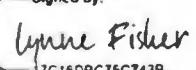
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Synchrony Bank  
Signed by:

By:  8/28/2024  
17C16DBC75C743B...

Lynne Fisher  
SVP Recovery Operations

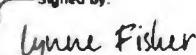
RFS Holding, L.L.C.  
Signed by:

By:  8/28/2024  
17C16DBC75C743B...  
Lynne Fisher  
Duly Authorized Signatory

Midl  
Signed by:  
Danielle Wohlfahrt 8/28/2024  
0410291913FA479...

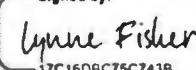
Danielle Wohlfahrt  
Managing Vice President,  
Business Development & Strategic Partnerships

Synchrony Card Funding, LLC  
Signed by:

By:  8/28/2024  
17C16DBC75C743B...

Lynne Fisher  
Duly Authorized Signatory

Retail Finance Credit Services, LLC  
Signed by:

By:  8/28/2024  
17C16DBC75C743B...  
Lynne Fisher  
Vice President

QC APPROVED

By: Sushila Pradhan

Date: 8/28/2024

Purchase Price Reconciliation/Funding Instructions

August 12, 2024

To: Midland

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Portfolio	<u>Debt Manager</u>
Agcy_Atty Code	<u>S2FSMIDS</u>
Total Number of Accounts	
Outstanding Balances on Transfer Date:	
Cut-Off Date	<u>August 17, 2024</u>
Transfer Date	<u>August 17, 2024</u>
Purchase Price Factor	
Purchase Price	
0% Holdout	
Amount of Wire transfer	
Date of Funding (no later than):	<u>August 23, 2024</u>
Wire Date:	<u>August 23, 2024</u>
Bank:	
ABA No.	
Account No:	
Account Holder:	
Location:	

**AFFIDAVIT OF SALE  
OF ACCOUNT  
BY ORIGINAL CREDITOR**

State of Florida County of Seminole

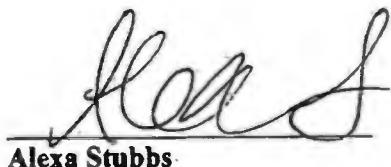
Alexa Stubbs being duly sworn, deposes and says:

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The Creditor has a process to detect and correct errors on these accounts. The above statements are true to the best of my knowledge.

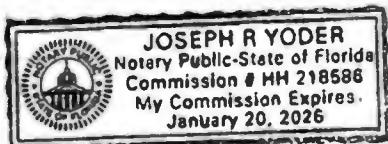
Signed this 10th day of September, 2024



Alexa Stubbs

Signed and sworn to before me this 10th day of September, 2024

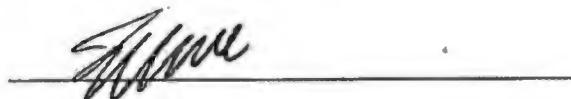
(Notary Stamp)



**NY CoC CERTIFICATE OF CONFORMITY UNDER  
NYS CLS CPLR § 2309(c) AND NYS CLS RPL § 299-a**

The undersigned does hereby certify that he/she is an attorney-at-law duly admitted to practice in the State of Florida and residing in the State of Florida; that he/she is a person duly qualified to make this certificate of conformity pursuant to Section 299-a of the Real Property Law of the State of New York; that he/she is fully acquainted with the laws of the State of Florida pertaining to the acknowledgment or proof of affidavits; that the acknowledgement or proof upon the foregoing Affidavit of Alexa Stubbs was taken by Joseph Yoder, a notary public in the State of Florida, in the manner prescribed by the laws of the State of Florida, being the state in which the Affidavit was taken; and, based on his/her review thereof, that the notarized Affidavit conforms to the laws of the State of Florida in all respects.

Witness my signature this 10th day of September, 2024



**Tyler Burich**

Attorney-at-law, State of Florida.

**THANK YOU**  
for being a Synchrony  
cardholder.



CARECREDIT/SYNCHRONY BANK

GABRIEL CRUZ  
Account Number: [REDACTED] 0205  
Statement Closing Date: 05/03/2023



Summary of Account Activity		Payment Information							
Previous Balance	\$1,648.73	New Balance	\$1,726.95						
♦ New Purchases	\$0.00	Minimum Payment This Period	\$96.00						
- Payments	\$0.00	Amount Past Due	\$532.00						
+/- Credits, Fees & Adjustments (net)	\$41.00	Total Minimum Payment Due	\$628.00						
+/- Interest Charge (net)	\$37.22	Payment Due Date	05/26/2023						
New Balance	\$1,726.95	<b>PAYMENT DUE BY 5 P.M. EASTERN ON THE DUE DATE.</b> We may convert your payment into an electronic debit. See reverse side.							
Credit Limit	\$1,500.00	Late Payment Warning: If we do not receive your Total Minimum Payment Due by the Payment Due Date listed above, you may have to pay a late fee up to \$41.00.							
Available Credit	\$0.00	Minimum Payment Warning: Making only the Total Minimum Payment Due will increase the amount of interest you pay and the time it takes to repay your balance. For example:							
Overlimit Amount	\$226.95	<table border="1"> <tr> <td>If you make no additional charges using this card and each month you pay ...</td> <td>You will pay off the balance shown on this statement in about ...</td> <td>And you will end up paying an estimated total of ...</td> </tr> <tr> <td>Only the minimum payment</td> <td>6 years</td> <td>\$2,850.00</td> </tr> </table>		If you make no additional charges using this card and each month you pay ...	You will pay off the balance shown on this statement in about ...	And you will end up paying an estimated total of ...	Only the minimum payment	6 years	\$2,850.00
If you make no additional charges using this card and each month you pay ...	You will pay off the balance shown on this statement in about ...	And you will end up paying an estimated total of ...							
Only the minimum payment	6 years	\$2,850.00							
Days in Billing Period	30	If you would like information about credit counseling services, call 1-877-302-6797.							
Pay online for free at: <a href="http://mysynchrony.com">mysynchrony.com</a> For Synchrony Bank customer service or to report your card lost or stolen, call (1-866-893-7864).									
Best times to call are Wednesday - Friday.									

Transaction Summary				
Tran Date	Post Date	Reference Number	Description	Amount
<b>FEES</b>				
04/26/2023	04/26/2023		LATE FEE	\$41.00
			<b>TOTAL FEES FOR THIS PERIOD</b>	<b>\$41.00</b>

Continued on next page

\* NOTICE: See reverse side and additional pages (if any) for important information concerning your account.

5102 0PH 1 7 3 230503 EX PAGE 1 of 3 9072 3600 06X2 01005302

Pay online at [mysynchrony.com](http://mysynchrony.com) or enclose this coupon with your check. Please use blue or black ink.



Total Minimum Payment Due	Past Due Amount	Payment Due Date	New Balance	Account Number
\$628.00	\$532.00	05/26/2023	\$1,726.95	[REDACTED] 0205

Payment Enclosed: \$      .

New address or e-mail?  Payment due includes \$ 532.00 past due. Please pay the past due amount PROMPTLY.  
Check the box at left and print changes on back

GABRIEL CRUZ  
4016 MILLAU LN  
CROWLEY TX 76036-4787

Make Payment to: SYNCHRONY BANK  
PO BOX 71715  
PHILADELPHIA, PA 19176-1715

**Customer Service:** For account information, call the number on the front of this statement. For Hearing or Speech disabilities, use a TTY. Unless your name is listed on this statement, your access to information on the account may be limited. You may also mail questions (but not payments) to P.O. Box 965033, Orlando, FL 32898-5033. Please include your account number on any correspondence you send to us.

**Payments:** Send payments to the address listed on the remittance coupon portion of this statement or pay online at [www.mysynchrony.com](http://www.mysynchrony.com).

**Oversight Payments:** Payments cannot be made in person; mail payments to Synchrony Bank, 140 Wekiva Springs Road, Longwood, FL 32779.

**Notice:** See below for your Billing Rights and other important information. Telephoning about billing errors will not preserve your rights under federal law. To preserve your rights, please write our Billing Inquiries Address, P.O. Box 965033, Orlando, FL 32898-5033.

Purchases, returns and payments made just prior to billing date may not appear until next month's statement. When you provide a check as 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. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment and you will not receive your check back from your financial institution. You may choose not to have your payment collected electronically by sending your payment (with the remittance coupon) in your own envelope - not the enclosed remittance envelope, addressed to: PO Box 530960, Atlanta, GA 30353-0960 and not the payment address.

**What To Do If You Think You Find A Mistake On Your Statement:**

If you think there is an error on your statement, write to us at:  
Synchrony Bank, P.O. Box 965033, Orlando, FL 32896-5033.

In your letter give us the following information:

- Account information: Your name and account number
- Dollar amount: The dollar amount of the 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. You may call us, 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.

**Your Rights If You Are Dissatisfied With Your Credit Card Purchases**  
If you are dissatisfied with the goods or services that you have purchased with your credit card, and you have tried in good faith to correct the problem with the merchant, you may have the right not to pay the remaining amount due on the purchase. To use this right, all of the following must be true:

1. The purchase must have been made in your home state or within 100 miles of your current mailing address, and the purchase price must have been more than \$50. (Note: Neither of these are necessary if your purchase was based on an advertisement we mailed to you, or if we own the company that sold you the goods or services.)
2. You must have used your credit card for the purchase. Purchases made with cash advances from an ATM or with a check that accesses your credit card account do not qualify.
3. You must not yet have fully paid for the purchase.

If all of the criteria above are met and you are still dissatisfied with the purchase, contact us in writing at:

Synchrony Bank  
P.O. Box 965033, Orlando, FL 32896-5035

While we investigate, the same rules apply to the disputed amount as discussed above. After we finish our investigation, we will tell you our decision. At that point, if we think you owe an amount and you do not pay we may report you as delinquent.

**Information About Payments:** You may at any time pay, in whole or in part, the total unpaid balance without any additional charge for prepayment. Payments received after 5:00 PM (ET) on any day will be credited as of the next day. Credit to your account may be delayed up to five days if payment (a) is not received at the payment address, (b) is not made in U.S. dollars drawn on a U.S. financial institution located in the U.S., (c) is not accompanied by the remittance coupon attached to your statement, (d) contains more than one payment or remittance coupon, (e) is not received in the remittance envelope provided or (f) includes staples, paper clips, tape, a folded check or correspondence of any type.

**Conditional Payments:** All written communications concerning disputed amounts, including any check or other payment instrument that: (i) indicates that the payment constitutes "payment in full" or is tendered as full satisfaction of a disputed amount, or (ii) is tendered with other conditions or limitations ("Disputed Payments"), must be mailed or delivered to us at:

P.O. Box 965033, Orlando, FL 32896-5035

**Credit To Your Account:** An amount shown in parenthesis is a credit or credit balance unless otherwise indicated. Credits will be applied to your previous balance immediately upon receipt, but will not satisfy any required payment that may be due.

**Credit Reports and Account Information:** If you believe that we may have reported inaccurate information about you to a consumer-reporting agency, please contact us at P.O. Box 965036, Orlando, FL 32896-5036. In doing so, please identify the inaccurate information and tell us why you believe it is incorrect. If you have a copy of the credit report that includes the inaccurate information, please include a copy of that report. We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

**How We Calculate Interest:** We figure the interest charge on your account by applying the periodic rate to the "daily balance" of your account for each day in the billing cycle. We then add the interest to the daily balance. To get the "daily balance" we take the beginning balance of your account each day (which includes unpaid interest), add any new charges, and applicable fees, and subtract any payments or credits. This gives us the daily balance. Any daily balance of less than zero will be treated as zero. A separate daily balance will be calculated for each balance type on your account. The balance(s) shown in the Interest Charges section of this statement is the sum of the daily balances for each day in the billing cycle divided by the number of days in the billing cycle.

**Bankruptcy Notice:** If you file bankruptcy you must send us notice, including account number and all information related to the proceeding to the following address: Synchrony Bank, Attn: Bankruptcy Dept., P.O. Box 965064, Orlando, FL 32896-5064.

**Your account is owned and serviced by Synchrony Bank.**

**Use of Information About You and Your Account:** Our Privacy Policy describes our collection and disclosure of information about you and your Account. If you would like another copy of the Privacy Policy, please call us at the customer service telephone number indicated on the front of this statement.

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This is an attempt to collect a debt and any information obtained will be used for that purpose.

\*By providing a telephone number on your account, you consent to Synchrony Bank and any other owner or servicer of your account contacting you about your account, including using any contact information or cell phone numbers you provide, and you consent to the use of any automatic telephone dialing system and/or an artificial or recorded voice when contacting you, even if you are charged for the call under your phone plan.

For changes of address and/or phone number, please check the box and print the changes below.



Street

\_\_\_\_\_

Address

\_\_\_\_\_

City, State

\_\_\_\_\_

ZIP

\_\_\_\_\_

Phone #

\_\_\_\_\_

\*Home Phone #

\*Business Phone #

\*Cell # or other phone #  
we can use to contact you

Remember, you can update the above information as well as your email address online at [www.mysynchrony.com](http://www.mysynchrony.com).

Transaction Summary (Continued)				
Tran Date	Post Date	Reference Number	Description	Amount
<b>INTEREST CHARGED</b>				
05/03/2023	05/03/2023		INTEREST CHARGE ON PURCHASES	\$37.22
			<b>TOTAL INTEREST FOR THIS PERIOD</b>	<b>\$37.22</b>
<b>2023 Totals Year-to-Date</b>				
			Total Fees Charged in 2023	\$205.00
			Total Interest Charged in 2023	\$171.32
			Total Interest Paid in 2023	\$0.00

Interest Charge Calculation				
Type of Balance	Expiration Date	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
Purchases	NA	26.99%	\$1,677.48	\$37.22

Cardholder News & Information				
<p>In order to protect your account privacy, we are unable to provide account information to anyone other than the cardholder(s) or an authorized party. If you wish to permit us to speak to an authorized party such as a spouse about your account, please send written authorization to the General Inquiries address.</p>				
<p><b>Please Note:</b> Our current Payment address has changed. If you mail your payment, please use the new address on your remittance coupon portion of the statement.</p>				
<p>If you need to contact Synchrony about the loss of a Synchrony cardholder, you can submit a deceased notification form located at <a href="http://www.syl.com">www.syl.com</a> under the 'Contact Us' page.</p>				
<p>You can pay your bill online or over the phone. We noticed you've been enjoying our easy paperless payment options, so we will no longer be including return envelopes. You can make things even easier by selecting the paperless statement option on your account online.</p>				
<p><b>YOUR ACCOUNT IS PAST DUE. PLEASE PAY THE MINIMUM PAYMENT DUE OR CONTACT THIS OFFICE AT THE PHONE NUMBER LISTED ON YOUR STATEMENT.</b></p>				



**THANK YOU**  
for being a Synchrony  
cardholder.



CARECREDIT/SYNCHRONY BANK

GABRIEL CRUZ  
Account Number: [REDACTED] 0205  
Statement Closing Date: 05/31/2023

 synchrony

Summary of Account Activity		Payment Information			
Previous Balance	\$1,726.95	New Balance	\$0.00		
♦ New Purchases	\$0.00	Total Minimum Payment Due	\$687.00		
- Payments	\$0.00	Payment Due Date	06/02/2023		
+/- Credits, Fees & Adjustments (net)	(\$1,726.95)	<b>PAYMENT DUE BY 5 P.M. EASTERN ON THE DUE DATE.</b> We may convert your payment into an electronic debit. See reverse side.			
+/- Interest Charge (net)	\$0.00	Late Payment Warning: If we do not receive your Total Minimum Payment Due by the Payment Due Date listed above, you may have to pay a late fee up to \$41.00.			
New Balance	\$0.00				
Credit Limit	\$1,500.00				
Available Credit	\$0.00				
Days in Billing Period	28				
Pay online for free at: <a href="http://mysynchrony.com">mysynchrony.com</a> For Synchrony Bank customer service or to report your card lost or stolen, call (1-866-893-7864).					
Best times to call are Wednesday - Friday.					

Transaction Summary				
Tran Date	Post Date	Reference Number	Description	Amount
05/31/2023	05/31/2023	F9072004P00999990	CHARGE OFF ACCOUNT-PRINCIPALS	(\$942.00)
05/31/2023	05/31/2023	F9072004P00999990	CHARGE OFF ACCOUNT-INTEREST	(\$253.95)
			CHARGE	
05/31/2023	05/31/2023	F9072004P00999990	CHARGE OFF ACCOUNT FEE	(\$572.00)
			CHARGEOFF*	
			FEES	
05/26/2023	05/26/2023		LATE FEE	\$41.00
			<b>TOTAL FEES FOR THIS PERIOD</b>	<b>\$41.00</b>

Continued on next page

\* NOTICE: See reverse side and additional pages (if any) for important information concerning your account.

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Pay online at [mysynchrony.com](http://mysynchrony.com) or enclose this coupon with your check. Please use blue or black ink.



Total Minimum Payment Due	Past Due Amount	Payment Due Date	New Balance	Account Number
\$687.00	\$0.00	06/02/2023	\$0.00	[REDACTED] 0205

Payment Enclosed : \$      .

New address or e-mail?  Check the box at left and print changes on back  
Payment due includes \$ 0.00 past due. Please pay the past due amount PROMPTLY.

GABRIEL CRUZ  
4016 MILLAU LN  
CROWLEY TX 76036-4787

Make Payment to: SYNCHRONY BANK  
PO BOX 71715  
PHILADELPHIA, PA 19176-1715

**Customer Service:** For account information, call the number on the front of this statement. For Hearing or Speech disabilities, use a TTS. Unless your name is listed on this statement, your access to information on the account may be limited. You may also mail questions (but not payments) to: P.O. Box 71754, Philadelphia, PA 19176-1754. Please include your account number on any correspondence you send to us.

**Payments:** Send payments to the address listed on the remit coupon portion of this statement or pay online at [www.mysynchrony.com](http://www.mysynchrony.com).

**Overnight Payments:** Payments cannot be made in person; mail payments to Synchrony Bank, 400 White Clay Center Drive, Newark, NJ 19711.

**Notice:** See below for your Billing Rights and other important information. Telephoning about billing errors will not preserve your rights under federal law. To preserve your rights, please write to our Billing Inquiries Address, P.O. Box 71756, Philadelphia, PA 19176-1756.

Purchases, returns, and payments made just prior to billing date may not appear until next month's statement. When you provide a check as 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. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution. You may choose not to have your payment collected electronically by sending your payment (with the payment stub), in your own envelope – not the enclosed window envelope, addressed to: P.O. Box 669823, Dallas, TX 75266-0779 and not the Payment Address.

**What To Do If You Think You Find A Mistake On Your Statement:**

If you think there is an error on your statement, write to us at the Billing Inquiries Address: Synchrony Bank, P.O. Box 71756, Philadelphia, PA 19176-1756. In your letter, give us the following information:

- Account Information: Your name and account number.
- Dollar Amount: The dollar amount of the 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. You may call us, 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.

**Your Rights If You Are Dissatisfied With Your Credit Card Purchases:**

If you are dissatisfied with the goods or services that you have purchased with your credit card, and you have tried in good faith to correct the problem with the merchant, you may have the right not to pay the remaining amount due on the purchase.

To use this right, all of the following must be true:

1. The purchases must have been made in your home state or within 100 miles of your current mailing address, and the purchase price must have been more than \$50. (Note: Neither of these are necessary if your purchase was based on an advertisement we mailed to you, or if we own the company that sold you the goods or services.)
2. You must have used your credit card for the purchase.
3. You must not yet have fully paid for the purchase.

If all of the criteria above are met and you are still dissatisfied with the purchase, contact us in writing at: Synchrony Bank, P.O. Box 71756, Philadelphia, PA 19176-1756.

While we investigate, the same rules apply to the disputed amount as discussed above. After we finish our investigation, we will tell you our decision. At that point, if we think you owe an amount and you do not pay we may report you as delinquent.

**Information About Payments:** You may at any time pay, in whole or in part, the total unpaid balance without any additional charge for prepayment.

Payments received after 5:00 p.m. (ET) on any day will be credited as of the next day. Credit to your Account may be delayed up to five days if payment (a) is not received at the Payment Address, (b) is not made in U.S. dollars drawn on a U.S. financial institution located in the U.S., (c) is not accompanied by the remittance coupon attached to your statement, (d) contains more than one payment or remittance coupon, or (e) includes staples, paper clips, tape, a folded check, or correspondence of any type. **Conditional Payments:** All written communications concerning disputed amounts, including any check or other payment instrument that (i) indicates that the payment constitutes "payment in full" or is tendered as full satisfaction of a disputed amount, or (ii) is tendered with other conditions or limitations ("Disputed Payments"), must be mailed or delivered to us at P.O. Box 71756, Philadelphia, PA 19176-1756.

**Credits To Your Account:** An amount shown in parentheses or preceded by a minus (-) sign is a credit or credit balance unless otherwise indicated. Credits will be applied to your previous balance immediately upon receipt, but will not satisfy any required payment that may be due.

**Credit Reports And Account Information:** If you believe that we have reported inaccurate information about you to a consumer reporting agency, please contact us at P.O. Box 71757, Philadelphia, PA 19176-1757. In doing so, please identify the inaccurate information and tell us why you believe it is incorrect. If you have a copy of the credit report that includes the inaccurate information, please include a copy of that report. We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

**How We Calculate Interest:**

**Daily Balance Method:** We figure the interest charge on your account by applying the periodic rate to the "daily balance" of your account for each day in the billing cycle. We then add the interest to the daily balance. To get the "daily balance" we take the beginning balance of your account each day (which includes unpaid interest), add any new charges, and applicable fees, and subtract any payments or credits. This gives us the daily balance. Any daily balance of less than zero will be treated as zero. A separate daily balance will be calculated for each balance type on your account. The balance(s) shown in the Interest Charges section of this statement is the sum of the daily balances for each day in the billing cycle divided by the number of days in the billing cycle. We will not charge you any interest on non-promotional purchases if you pay your entire balance by the due date each month. Please refer to the due date shown on the front of your statement. We will begin charging interest on promotional purchases on the purchase date.

**Your Account Is Owned and Serviced by Synchrony Bank.**

**Use of Information About You and Your Account:** Our Privacy Policy describes our collection and disclosure of information about you and your Account. If you would like another copy of the Privacy Policy, please call us at the customer service telephone number indicated on the front of this statement.

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01FSS302 - 03/06/23

**Bankruptcy Notice:** If you file bankruptcy, you must send us notice, including account number and all information related to the proceeding to the following address: Synchrony Bank, Attn: Bankruptcy Dept., P.O. Box 19176-1783, Philadelphia, PA 19176-1783.

This is an attempt to collect a debt and any information obtained will be used for that purpose.

\*By providing a telephone number on your account, you consent to Synchrony Bank and any other owner or servicer of your account contacting you about your account, including using any contact information or cell phone numbers you provide, and you consent to the use of any automatic telephone dialing system and/or an artificial or prerecorded voice when contacting you, even if you are charged for the call under your phone plan.

For changes of address, phone number and/or email, please check the box and print the changes below.

Street  
Address  
City, State  
ZIP  
Phone #  
Email

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Home Phone #      \*Business Phone #      \*Cell # or other phone #  
we can use to contact you      \*\*Email Address

\*\* Remember, you can update the above information as well as your email address online at [www.mysynchrony.com](http://www.mysynchrony.com).

Transaction Summary (Continued)				
Tran Date	Post Date	Reference Number	Description	Amount
			INTEREST CHARGED	
05/31/2023	05/31/2023		INTEREST CHARGE ON PURCHASES	\$0.00
			TOTAL INTEREST FOR THIS PERIOD	\$0.00
			2023 Totals Year-to-Date	
			Total Fees Charged in 2023	\$246.00
			Total Interest Charged in 2023	\$171.32
			Total Interest Paid in 2023	\$0.00

Interest Charge Calculation				
Type of Balance	Expiration Date	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
Purchases	NA	26.99%	\$0.00	\$0.00

Cardholder News & Information				
In order to protect your account privacy, we are unable to provide account information to anyone other than the cardholder(s) or an authorized party. If you wish to permit us to speak to an authorized party such as a spouse about your account, please send written authorization to the General Inquiries address.				
Please Note: Our current Payment address has changed. If you mail your payment, please use the new address on your remittance coupon portion of the statement.				
If you need to contact Synchrony about the loss of a Synchrony cardholder, you can submit a deceased notification form located at <a href="http://www.syf.com">www.syf.com</a> under the 'Contact Us' page.				
You can pay your bill online or over the phone. We noticed you've been enjoying our easy paperless payment options, so we will no longer be including return envelopes. You can make things even easier by selecting the paperless statement option on your account online.				
Statement not provided to customer.				



## Check out our new podcast!

Tune in every Wednesday, on your favorite podcast app, to hear our Care Experts share the latest in healthcare treatments & procedures — from tummy tucks and BOTOX® Cosmetics to pet nutrition and more.



Listen to the latest episode at [carecredit.com/careexperts](http://carecredit.com/careexperts)

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 Use of these names, logos, and brands does not imply endorsement.

CARECREDIT/SYNCHRONY BANK

GABRIEL CRUZ  
 Account Number : XXXXXXXXXX 0205  
 Statement Closing Date: 11/03/2022



Summary of Account Activity		Payment Information			
Previous Balance	\$1,470.84	New Balance	\$1,281.65		
+ New Purchases	\$0.00	Total Minimum Payment Due	\$87.00		
- Payments	\$263.00	Payment Due Date	11/26/2022		
+/- Credits, Fees & Adjustments (net)	\$41.00	<b>PAYMENT DUE BY 5 P.M. EASTERN ON THE DUE DATE.</b> We may convert your payment into an electronic debit. See reverse side.			
+/- Interest Charge (net)	\$32.81				
New Balance	\$1,281.65				
Credit Limit	\$1,500.00				
Available Credit	\$218.00				
Days in Billing Period	31				
Pay online for free at: <a href="http://mysynchrony.com">mysynchrony.com</a> For Synchrony Bank customer service or to report your card lost or stolen, call (1-866-893-7864).					
Best times to call are Wednesday - Friday.					
		If you make no additional charges using this card and each month you pay ...	You will pay off the balance shown on this statement in about ...		
		Only the minimum payment	And you will end up paying an estimated total of ...		
		7 years	\$2,601.00		
If you would like information about credit counseling services, call 1-877-302-8797.					

### Transaction Summary

Tran Date	Post Date	Reference Number	Description	Amount
10/27/2022	10/27/2022	8534812MX0152MN27	PAYMENT - THANK YOU	(\$263.00)
			FEES	
10/26/2022	10/26/2022		LATE FEE	\$41.00
			<b>TOTAL FEES FOR THIS PERIOD</b>	<b>\$41.00</b>

Continued on next page

\* NOTICE: See reverse side and additional pages (if any) for important information concerning your account.

5302 0FM 1 7 3 221103 PAGE 1 of 3 9072 3600 C6K2 01DC5302

Pay online at [mysynchrony.com](http://mysynchrony.com) or enclose this coupon with your check. Please use blue or black ink.



Total Minimum Payment Due	Payment Due Date	New Balance	Account Number
\$87.00	11/26/2022	\$1,281.65	<span style="background-color: black; color: black;">XXXXXXXXXX</span> 0205

Payment Enclosed: \$      .

New address or e-mail?  
 Check the box at left and print changes on back

GABRIEL CRUZ  
 4016 MILLAU LN  
 CROWLEY TX 76036-4787

Make Payment to: SYNCHRONY BANK  
 PO BOX 960061  
 ORLANDO, FL 32896-0061

**Customer Service:** For account information, call the number on the front of this statement. For Hearing or Speech disabilities, use a TRS. Unless your name is listed on this statement, your access to information on the account may be limited. You may also mail questions (but not payments) to: P.O. Box 965033, Orlando, FL 32896-5033. Please include your account number on any correspondence you send to us.

**Payments:** Send payments to the address listed on the remittance coupon portion of this statement or pay online at [www.mysynchrony.com](http://www.mysynchrony.com).

**Oversight Payments:** Payments cannot be made in person; mail payments to Synchrony Bank, 140 Winkie Springs Road, Longwood, FL 32779.

**Notice:** See below for your Billing Rights and other important information. Telephoning about billing errors will not preserve your rights under federal law. To preserve your rights, please write to our Billing Inquiries Address, P.O. Box 965035, Orlando, FL 32896-5035.

Purchases, returns and payments made just prior to billing date may not appear until next month's statement. When you provide a check as 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. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment and you will not receive your check back from your financial institution. You may choose not to have your payment collected electronically by sending your payment (with the remittance coupon) in your own envelope – not the enclosed remittance envelope, addressed to: PO Box 530960, Atlanta, GA 30353-0960 and not the payment address.

**What To Do If You Think You Find A Mistake On Your Statement:**

If you think there is an error on your statement, write to us at:  
Synchrony Bank, P.O. Box 965035, Orlando, FL 32896-5035.

In your letter give us the following information:

- **Account Information:** Your name and account number
- **Dollar amount:** The dollar amount of the 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. You may call us, 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.

**Your Rights If You Are Dissatisfied With Your Credit Card Purchases:** If you are dissatisfied with the goods or services that you have purchased with your credit card, and you have tried in good faith to correct the problem with the merchant, you may have the right not to pay the remaining amount due on the purchase. To use this right, all of the following must be true:

1. The purchase must have been made in your home state or within 100 miles of your current mailing address, and the purchase price must have been more than \$50. (Note: Neither of these are necessary if your purchase was based on an advertisement we mailed to you, or if we own the company that sold you the goods or services.)
2. You must have used your credit card for the purchase. Purchases made with cash advances from an ATM or with a check that accesses your credit card account do not qualify.
3. You must not yet have fully paid for the purchase.

If all of the criteria above are met and you are still dissatisfied with the purchase, contact us in writing at:  
Synchrony Bank  
P.O. Box 965035, Orlando, FL 32896-5035

While we investigate, the same rules apply to the disputed amount as discussed above. After we finish our investigation, we will tell you our decision. At that point, if we think you owe an amount and you do not pay we may report you as delinquent.

**Information About Payments:** You may at any time pay, in whole or in part, the total unpaid balance without any additional charge for prepayment. Payments received after 5:00 PM (ET) on any day will be credited as of the next day. Credit to your account may be delayed up to five days if payment (a) is not received at the payment address, (b) is not made in U.S. dollars drawn on a U.S. financial institution located in the U.S., (c) is not accompanied by the remittance coupon attached to your statement, (d) contains more than one payment or remittance coupon, (e) is not received in the remittance envelope provided or (f) includes staples, paper clips, tape, a folded check or correspondence of any type.

**Conditional Payments:** All written communications concerning disputed amounts, including any check or other payment instrument that: (i) indicates that the payment constitutes "payment in full" or is tendered as full satisfaction of a disputed amount, or (ii) is tendered with other conditions or limitations ("Disputed Payments"), must be mailed or delivered to us at:  
P.O. Box 965035, Orlando, FL 32896-5035

**Credits To Your Account:** An amount shown in parenthesis is a credit or credit balance unless otherwise indicated. Credits will be applied to your previous balance immediately upon receipt, but will not satisfy any required payment that may be due.

**Credit Reports and Account Information:** If you believe that we may have reported inaccurate information about you to a consumer-reporting agency, please contact us at P.O. Box 965036, Orlando, FL 32896-5036. In doing so, please identify the inaccurate information and tell us why you believe it is incorrect. If you have a copy of the credit report that includes the inaccurate information, please include a copy of that report. We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

**How We Calculate Interest:** We figure the interest charge on your account by applying the periodic rate to the "daily balance" of your account for each day in the billing cycle. We then add the interest to the daily balance. To get the "daily balance" we take the beginning balance of your account each day (which includes unpaid interest), add any new charges, and applicable fees, and subtract any payments or credits. This gives us the daily balance. Any daily balance of less than zero will be treated as zero. A separate daily balance will be calculated for each balance type on your account. The balance(s) shown in the Interest Charges section of this statement is the sum of the daily balances for each day in the billing cycle divided by the number of days in the billing cycle.

**Bankruptcy Notice:** If you file bankruptcy you must send us notice, including account number and all information related to the proceeding to the following address: Synchrony Bank, Attn: Bankruptcy Dept., P.O. Box 965064, Orlando, FL 32896-5064.

**Your account is owned and serviced by Synchrony Bank.**

**Use of Information About You and Your Account:** Our Privacy Policy describes our collection and disclosure of information about you and your Account. If you would like another copy of the Privacy Policy, please call us at the customer service telephone number indicated on the front of this statement.

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This is an attempt to collect a debt and any information obtained will be used for that purpose.

\*By providing a telephone number on your account, you consent to Synchrony Bank and any other owner or servicer of your account contacting you about your account, including using any contact information or cell phone numbers you provide, and you consent to the use of any automatic telephone dialing system and/or an artificial or rerecorded voice when contacting you, even if you are charged for the call under your phone plan.

For changes of address and/or phone number, please check the box and print the changes below.



Street  
Address  
City, State  
ZIP  
Phone #

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Home Phone #      \*Business Phone #      \*Cell # or other phone #  
we can use to contact you



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### Transaction Summary (Continued)

Tran Date	Post Date	Reference Number	Description	Amount
<b>INTEREST CHARGED</b>				
11/03/2022	11/03/2022		INTEREST CHARGE ON PURCHASES	\$32.81
			<b>TOTAL INTEREST FOR THIS PERIOD</b>	<b>\$32.81</b>
<b>2022 Totals Year-to-Date</b>				
			Total Fees Charged in 2022	\$365.00
			Total Interest Charged in 2022	\$351.44
			Total Interest Paid in 2022	\$710.00

### Interest Charge Calculation

Type of Balance	Expiration Date	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
Purchases	NA	26.99%	\$1,431.14	\$32.81

### New Promotional Financing Plans

This notice is to let you know about some promotional financing plans that may be available for you when you use your card for future purchases. This is only a summary of key terms. At times, we may offer you other promotional financing plans for certain purchases. Details of available promotions will be provided to you at the time of your transactions. Not all plans or all plan periods will be available at every retailer. For purposes of this notification, your Purchase Annual Percentage Rate ("APR") is 26.99%. See the Interest Charge Calculation section of this billing statement to determine if this APR is variable. If a (v) is shown next to your APR, this APR will vary with the market based on the prime rate. Subject to credit approval. Regular account terms apply to non-promotional purchases and, after promotion ends, to promotional purchase.

#### No Interest If Paid Within Promotional Period

(These can be advertised as Deferred Interest promotions)

Under this promotion, no interest charges will be assessed if the promotional purchase balance is paid in full within the promotional period. If the promotional purchase balance is not paid in full by the end of the promotional period, interest will be imposed from the date of purchase at the Purchase APR stated above. Minimum or fixed monthly payments are required. This promotion may be offered for periods of 6, 12, 18, or 24 months.

Please keep this for your records. If you have any questions, please call us at the Customer Service number shown on your statement.

### Cardholder News & Information

In order to protect your account privacy, we are unable to provide account information to anyone other than the cardholder(s) or an authorized party. If you wish to permit us to speak to an authorized party such as a spouse about your account, please send written authorization to the General Inquiries address.

If you need to contact Synchrony about the loss of a Synchrony cardholder, you can submit a deceased notification form located at [www.syl.com](http://www.syl.com) under the 'Contact Us' page.

You can pay your bill online or over the phone. We noticed you've been enjoying our easy paperless payment options, so we will no longer be including return envelopes. You can make things even easier by selecting the paperless statement option on your account online.

Synchrony Bank may continue to obtain information, including employment and income information from others about you (including requesting reports from consumer reporting agencies and other sources) to review, maintain or collect your account.

