



Fairfield County Bank

PO BOX 2050 Ridgefield CT, 06877-0950

Forwarding Service Requested

Phone
877-431-7431
Website
www.fairfieldcountybank.com
Email
customersupport@fairfieldcountybank.com

Customer Statement

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Account Number: xxxxxxxx0154
Statement Date: Jun 01, 2019 thru Jun 28, 2019

Summary - All Accounts

Product	Account #	Ending Balance
Non Profit NOW	xxxxxxx0154	\$438.79

MOMS CLUB OF FAIRFIELD CT SOUTH
C/O LAURIE C RUBEL
33 FERN ST
FAIRFIELD CT 06824-6822

Non Profit NOW - xxxxxxxx0154

Date	Transaction Description	Withdrawal	Deposit	Balance
	BEGINNING BALANCE			\$255.93
Jun 07	External Deposit WePay SV9T - 2914232439141 WEPAY		45.24	301.17
Jun 10	External Deposit WePay SV9T - 2714247928348 WEPAY		22.62	323.79
Jun 21	Deposit		300.00	623.79
Jun 24	670 Check	-185.00		438.79
	ENDING BALANCE			\$438.79

MOMS CLUB OF FAIRFIELD CT SOUTH

Check Summary

Check No.	Date	Amount	Check No.	Date	Amount	Check No.	Date	Amount
670	Jun 24	185.00						

Number of Checks: 1 * Indicates a skip in sequence e Indicates an electronic check

Balance Summary

Date	Balance	Date	Balance	Date	Balance	Date	Balance
Jun 07	301.17	Jun 10	323.79	Jun 21	623.79	Jun 24	438.79

Interest Summary

Avg. Daily Balance	Min. Balance for Period	Interest Period	Days in Period	Interest Earned	Annual Percentage Yield Earned	Interest Paid YTD
359.50	255.93	Jun 01, 2019 - Jun 28, 2019	28	0.00	0.00%	0.00

Debit For Dollars!

No matter how big or small the purchase, use your Fairfield County Bank Visa® Debit Card wherever you shop for your chance to win!

Learn more about this program at
www.FairfieldCountyBank.com/DebitforDollars

Member FDIC



032ZDB_BK_261FC0001_M035

Account Number:

xxxxxxx0154

Statement Date:

Jun 01, 2019 thru Jun 28, 2019

CHECKS OUTSTANDING						DEPOSITS NOT ON STATEMENT		BEFORE RECONCILING – DEDUCT ANY SERVICE CHARGES OR OTHER DEBIT CHARGES ON STATEMENT FROM YOUR CHECKBOOK BALANCE – ADD ANY INTEREST CREDITS OR OTHER CREDITS TO YOUR CHECKBOOK.
NUMBER	AMOUNT		NUMBER	AMOUNT				
TOTAL TO TOP OF NEXT COLUMN			TOTAL CHECKS OUTSTANDING			TOTAL DEPOSITS		PLEASE CHECK CAREFULLY AND REPORT ANY DIFFERENCES

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

Telephone us or write us at the number or address shown on the front of the statement, 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 sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number.
2. Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
3. Tell us the dollar amount of the suspected error. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will recredit 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.

For errors involving new accounts, point-of-sale, or foreign initiated transactions, we may take up to 90 days to investigate your complaint or question. For new accounts, we may take up to 20 business days to credit your account for the amount in error.

After completing the investigation, we will tell you the results within three business days. If we decide there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

The following pertains to accounts established for personal, family, or household purposes only.

BILLING RIGHTS SUMMARY

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR STATEMENT

If you think your statement is wrong, or if you need more information about a transaction on your statement, write us at the address shown on the front of this statement as soon as possible. We must hear from you no later than sixty (60) days after we sent you the first statement on which the error or problem appeared. You may 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.
3. Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item that you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

IF YOU NEED TO REPORT A CHANGE OF ADDRESS, PLEASE COMPLETE THE SECTION BELOW AND RETURN THIS SECTION TO US BY MAIL OR DELIVER TO OUR ADDRESS.

NAME (PLEASE PRINT)

STREET ADDRESS

CITY _____ STATE _____ ZIP CODE _____

AUTHORIZED SIGNATURE DATE.....

DAYTIME TELEPHONE ()..... HOME TELEPHONE ().....

THIS CHANGE APPLIES TO:

CHECKING ACCOUNT ☐ SAVINGS ACCOUNT ☐ SAVINGS CERTIFICATE ☐ MORTGAGE LOAN ☐ INSTALLMENT LOAN ☐ OTHER ☐



Account Number: xxxxxxxx0154

Statement Date: Jun 01, 2019 thru Jun 28, 2019

Interest Rate Summary

Date	Rate%	Date	Rate%	Date	Rate%	Date	Rate%
Sep 14	0.00%						

Overdraft/Returned Item Fees

Fee Type	Total For This Period	Total Year-to-Date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

Account Summary

Previous Date	Beginning Balance	Deposits	Interest Paid	Withdrawals	Fees	Ending Balance
Jun 01, 2019	255.93	367.86	0.00	185.00	0.00	438.79