

904 Poquonnock Road, Groton, CT 06340 RETURN SERVICE REQUESTED

customercare@chelseagroton.com 860-448-4200 **Customer Statement**

ry i di s

Account Number:

xxxxxxxxx7358

Statement Date: Jun 01, 2023 thru Jun 30, 2023

Summary - All Accounts

Product	Account #	Ending Balance
Non-Profit Checking	xxxxxxxx7358	\$1,185.13

MOMS CLUB OF GROTON-LEDYARD-MYSTIC CT C/O MANON A CYR 76 DARTMOUTH DR MYSTIC CT 06355

Date	Transaction Description	Withdrawal	Deposit	Balance
Date	BEGINNING BALANCE	Witharawai	Ворозіі Т	\$1,461.62
Jun 30	Total Deposits		151.06	ψ1,401.02
Jun 30	Total Withdrawals	427.55		
	ENDING BALANCE			\$1,185.13
	Deposits and Credits			
Date	Transaction Description			Amount
Jun 02	Deposit			30.00
Jun 05	External Deposit PAYPAL TRANSFER TRANSFER			30.07
Jun 05	Descriptive Deposit Debit Card Rewards May			0.78
Jun 20	External Deposit PAYPAL TRANSFER TRANSFER			30.07
Jun 27	External Deposit PAYPAL TRANSFER TRANSFER			60.14
	Withdrawals and Debits			
Date	Transaction Description			Amount
Jun 05	External Withdrawal PAYPAL INSTANT TRANSFER INST XFER			-60.00
Jun 16	POS Withdrawal (FIS) SAFE FUTURES IN SAFE FUTURES INC. WWW.SAFEFUTUR CT(1204)			-150.00
Jun 20	External Withdrawal PAYPAL INSTANT TRANSFER INST XFER			-26.31
Jun 20	External Withdrawal PAYPAL INSTANT TRANSFER INST XFER			-41.24



Beware of text messages claiming that your debit card will be deactivated. Phishing text messages are an increasingly common way for fraudsters to get your confidential information. CGB will never request that you provide your full card number to us over the phone.

Chelsea Groton Bank



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Account Number: xxxxxxxx7358
Statement Date: Jun 01, 2023 thru Jun 30, 2023

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

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.

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.
- 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 ADDRES OR DELIVER TO OUR ADDRESS.	S, PLEASE COMPLETE THE SECTION	ON BELOW AND RETURN THIS SECTION TO US BY MAI
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 MORTO	GAGE LOAN □ INSTALLMENT LOAN □ OTHER □



helsea Groton

Account Number:
Statement Date:

xxxxxxxx7358

Jun 01, 2023 thru Jun 30, 2023

Check Summary

Check No.	Date	Amount	Check No.	Date	Amount	Check No.	Date	Amount
128	Jun 26 📮	150.00						

Number of Checks: 1

Feel good about your bank

* Indicates a skip in sequence

e Indicates an electronic check

Balance Summary

Date	Balance	Date	Balance	Date	Balance	Date	Balance
Jun 02	1,491.62	Jun 16	1,312.47	Jun 26	1,124.99	Jun 27	1,185.13
Jun 05	1,462.47	Jun 20	1.274.99				

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, 2023	1,461.62	151.06	0.00	427.55	0.00	1,185.13



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