

(WESTERN MICHIGAN) P.O. BOX 630900 CINCINNATI OH 45263-0900

MOMS CLUB OF KCC KENTWOOD CALEDONIA CASCADE 1321 CRYSTAL WAY CT MIDDLEVILLE MI 49333-7046



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14394

Statement Period Date: 6/1/2019 - 6/30/2019 Account Type: BUS BASICS CHECKING Account Number: 7160902834

Banking Center: Caledonia Banking Center Phone: 616-891-7060 Business Banking Support: 877-534-2264

| Account Summary - 7160902834           |   |          |                          |    |
|--|---|----------|--------------------------|----|
| 06/01                                  | Beginning Balance<br>Checks<br>Withdrawals / Debits | \$514.60 | Number of Days in Period | 30 |
| 06/30                                  | Deposits / Credits<br>Ending Balance                | \$514.60 |                          |    |
| Analysis I                             | Period: 05/01/19 - 05/31/19                         |          |                          |    |
| Standard Monthly Service Charge        |   |          | \$0.00                   |    |
| Standard Monthly Service Charge Waived |   | \$0.00   |                          |    |
| Service C                              | harge withdrawn on 06/21/19                         |          | \$0.00                   |    |
|  |   |          |                          |    |

IF YOU HAVE A FIFTH THIRD BUSINESS OR PROFESSIONAL DEBIT MASTERCARD, YOUR CARD WILL NO LONGER COME WITH CERTAIN INSURANCE BENEFITS DUE TO CHANGES IN THE MASTERCARD DEBIT CARD PROGRAM. THE CANCELLATION OF YOUR EXTENDED WARRANTY-POLICY NO. 84161537-03, PURCHASE ASSURANCE-POLICY NO. 84161537-03, AND MASTERCOVERAGE POLICY NO. 84161543 BENEFITS WILL BE EFFECTIVE ON JULY 1, 2019 AT 12:00 AM EDT. FOR MORE INFORMATION ABOUT YOUR COVERAGE, GO TO WWW.53.COM/DEBIT. TO REQUEST A PRINTED COPY, CALL 800-972-3030. THE POLICIES ARE ISSUED BY NEW HAMPSHIRE INSURANCE COMPANY, AN AIG COMPANY.



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