

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

MOMS CLUB OF MUSKEGON MICH 3381 EVANSTON AVE MUSKEGON MI 49442-6427



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19079

Statement Period Date: 6/1/2019 - 6/30/2019 Account Type: 5/3 BUS STANDARD CKG Account Number: 7921674136

Banking Center: Apple Ave. Bnk Centr Banking Center Phone: 231-777-5678 Business Banking Support: 877-534-2264

Account Summary - 7921674136

06/01	Beginning Balance	\$534.25	Number of Days in Period	30
2	Checks	\$(200.00)		
	Withdrawals / Debits			
3	Deposits / Credits	\$362.08		
06/30	Ending Balance	\$696.33		

Analysis Period: 05/01/19 - 05/31/19

Standard Monthly Service Charge \$11.00

Standard Monthly Service Charge Waived (see below) -\$11.00

Service Charge withdrawn on 06/21/19 \$0.00

Standard Monthly Service Charge waived if:

Current Relationship Overview:

Your business maintains a total monthly average	Balance Criteria Met?	No
balance of \$3,500 across its business checking, savings,	Total Combined Monthly Average Balance	\$519.22
and certificate of deposit accounts.		

OR your business spends at least \$500 per month on
Other Criteria Met?
No
its business credit card.
\$500 Business Credit Card Spend?
No

Checks 2 checks totaling \$200.00

* Indicates gap in check sequence i = Electronic Image s = Substitute Check

Number	Date Paid	Amount	Number	Date Paid	Amount
1011 i	06/06	150.00	1012 i	06/11	50.00

Deposits / Credits			3 items totaling \$362.08
Date	Amount	Description	
06/10	140.00	DEPOSIT	
06/14	182.08	DEPOSIT	
06/24	40.00	DEPOSIT	

Daily Balance Su	ummary				
Date	Amount	Date	Amount	Date	Amount
06/06	384.25	06/11	474.25	06/24	696.33
06/10	524.25	06/14	656.33		

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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