



Regions Bank
Lake Conway Office
5249 S Conway Road
Orlando, FL 32812

MOMS CLUB OF ORLANDO CONWAY AREA FL
1302 CANBERRA AVE
ORLANDO FL 32806-1739

ACCOUNT # **0077513797**

Cycle 092
Enclosures 26
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LIFEGREEN NOT FOR PROFIT CHECKING

June 1, 2019 through June 28, 2019

SUMMARY

Beginning Balance	\$965.70	Minimum Daily Balance	\$716
Deposits & Credits	\$250.00 +	Average Monthly Statement Balance	\$788
Withdrawals	\$182.26 -		
Fees	\$0.00 -		
Automatic Transfers	\$0.00 +		
Checks	\$66.62 -		
Ending Balance	\$966.82		

DEPOSITS & CREDITS

06/25	Paypal	Transfer Jenifer Hills	5.30
06/25	Paypal	Transfer Jenifer Hills	234.70
06/27	Deposit - Thank You		10.00
Total Deposits & Credits			\$250.00

WITHDRAWALS

06/03	Card Purchase ABC Fine Wine/S	5921 Orlando	FL 32806	4117	42.02
06/03	Card Purchase Lucky S South O	5411 Orlando	FL 32806	4117	8.51
06/03	Card Purchase Water Front	5812 Orlando	FL 32806	4117	131.73
Total Withdrawals					\$182.26

CHECKS

Date	Check No.	Amount
06/11	1294	66.62

DAILY BALANCE SUMMARY

Date	Balance	Date	Balance	Date	Balance
06/03	783.44	06/25	956.82	06/27	966.82
06/11	716.82				

For all your banking needs, please call 1-800-REGIONS (734-4667)
or visit us on the Internet at www.regions.com. (TTY/TDD 1-800-374-5791)



Thank You For Banking With Regions!
2019 Regions Bank Member FDIC. All loans subject to credit approval.



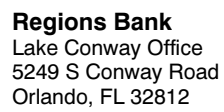
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**You may request account disclosures containing
terms, fees, and rate information (if applicable)
for your account by contacting any Regions office.**



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MEMBERSHIP CARD

MOMS CLUB OF ORLANDO CONWAY AREA FL
4455 Inverness Circle
Orlando, FL 32812

1284
03-050331

6/5/19 DATE

PAY TO THE ORDER OF Priscilla Walker

Sixty-Six and 62/100 \$ 66.62

DOLLARS 66

REGIONS

FOR Expenses for Socials Jennifer Hills

⑆063104888⑆ 0077513797⑆ 1294

Member's Date

Check# 1294 06/11/2019 \$66.62

Easy Steps to Balance Your Account

		Checking Account
1.	Write here the amount shown on statement for ENDING BALANCE	\$
2.	Enter any deposits which have not been credited on this statement.	\$ +
3.	Total lines 1 & 2	\$ =
4.	Enter total from 4a (column on right side of page)	\$ -
5.	Subtract line 4 from line 3. This should be your checkbook balance.	\$ =

4a List any checks, payments, transfers or other withdrawals from your account that are not on this statement.

Check No.	Amount	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total Enter in Line 4 at Left		

The law requires you to use "reasonable care and promptness" in examining your bank statement and any checks sent with it and to report to the Bank an unauthorized signature (i.e., a forgery), any alteration of a check, or any unauthorized endorsement. You must report any forged signatures, alterations or forged endorsements to the Bank within the time periods specified under the Deposit Agreement. If you do not do this, the Bank will not be liable to you for the losses or claims arising from the forged signatures, forged endorsements or alterations. Please see the Deposit Agreement for further explanation of your responsibilities with regard to your statement and checks. A copy of our current Deposit Agreement may be requested at any of our branch locations.

Summary of Our Error Resolution Procedures
In Case of Errors or Questions About Your Electronic Transfers
Telephone us toll-free at 1-800-734-4667
or write us at
Regions Electronic Funds Transfer Services
Post Office Box 413
Birmingham, Alabama 35201

Please contact Regions as soon as you can, if you think your statement is wrong or if you need more information about a transfer listed on your statement. We must hear from you no later than sixty (60) days after we sent the FIRST statement on which the problem or error appeared.

- (1) Tell us your name and account number.
- (2) Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe it is an error or why you need more information.
- (3) Tell us the dollar amount of the suspected error.

If you tell us verbally, we may require that you send us your complaint or question in writing within ten (10) business days.

We will determine whether an error occurred within ten (10) business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to forty-five (45) days to investigate your complaint or question (ninety (90) days for POS transactions or for transfers initiated outside of the United States). If we decide to do this, we will credit your account within ten (10) business days for the amount you think is in error. If, after the investigation, we determine that no bank error occurred, we will debit your account to the extent previously credited. If we ask you to put your complaint in writing and we do not receive it within ten (10) business days, we may not credit your account.

New Accounts- If an alleged error occurred within thirty (30) days after your first deposit to your account was made, we may have up to ninety (90) days to investigate your complaint, provided we credit your account within twenty (20) business days for the amount you think is in error. If we decide there was no error, we will send you a written explanation within three (3) business days after we finish our investigation. You may ask for copies of the documents that we used in our investigation.

FOR QUESTIONS CONCERNING THIS STATEMENT OR FOR VERIFICATION OF A PREAUTHORIZED DEPOSIT, PLEASE CALL 1-800-REGIONS (734-4667) OR VISIT YOUR NEAREST REGIONS LOCATION.

ADJ - Adjustment
EB - Electronic Banking

RI - Return Item
NSF - Nonsufficient Funds

CR - Credit
APY - Annual Percentage Yield

SC - Service Charge
FWT - Federal Withholding Tax

OD - Overdraw
*Break in Number Sequence