

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

MOMS CLUB OF GALLATIN AREA 926 AQUA DR GALLATIN TN 37066-4102



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Statement Period Date: 6/1/2019 - 6/30/2019 Account Type: 5/3 BUS STANDARD CKG Account Number: 7921876418

Banking Center: Gallatin Banking Center Phone: 615-451-7001 Business Banking Support: 877-534-2264

Account Summary - 7921876418				
06/01 1	Beginning Balance Checks Withdrawals / Debits Deposits / Credits	\$280.76 \$(6.00) \$50.00	Number of Days in Period	30
06/30	Ending Balance	\$324.76		
Analysis I	Period: 05/01/19 - 05/31/19			
Standard Monthly Service Charge			\$11.00	
Standard Monthly Service Charge Waived (see below)			-\$11.00	
Service C	harge withdrawn on 06/21/19	1	\$0.00	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, and certificate of deposit accounts.			Total Combined Monthly Average Balance	\$298.18
OR your business spends at least \$500 per month on			Other Criteria Met?	No
its business credit card.			\$500 Business Credit Card Spend?	No
Check				1 check totaling \$6.00
· ·	ap in check sequence i = Electronic : Date Paid Amour			
Number 1004 i	Date Paid Amour 06/11 6.0	_		
Deposits / Credits				1 item totaling \$50.00
Date 06/10	Amount 50.00	Description DEPOSIT		
	00.00			
Daily Ba	lance Summary			
Date	Amour	t Date	Amount	
06/10	330.7	6 06/11	324.76	

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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