

ACCOUNT NUMBER xxx0965

STATEMENT DATE 6/30/23

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MOMS CLUB OF CASTLE ROCK SW CO
651 HAMPSTEAD AVE
CASTLE ROCK CO 80104-3237

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BASIC SMALL BUSINESS CHECKING					
Account Number	xxx0965	Statement Dates	6/01/23	thru 7/02/23	
Previous Stmt Balance	1,221.01	Days in Statement Period		32	
Deposits/Credits	25.00	Average Collected		1,175.30	
Checks/Debits	155.61	Average Ledger		1,175.30	
Service Charge	0.00	Interest Earned		0.00	
Interest Paid	0.00				
Current Stmt Balance	1,090.40				
DEPOSITS AND OTHER CREDITS					

	DEPOSITS AND OTHER CREDITS				
Date	Description	Amount			
6/05	CASHOUT VENMO 5264681992 23/06/05	25.00			

	OTHER DEBITS			
Date	Description	Amount		
6/16	MEETUP ORG SUB 6 DBT CRD 2204 06/15/23 04 12 E 49th Street NEW YORKNY C# 5071	98.94-		
6/23	PAYMENT VENMO 3264681992 23/06/23 ID# 1027766133252 TRACE# 091000013769292	39.42-		
6/28	PAYMENT VENMO 3264681992 23/06/28	17.25-		

ID# 1027848386770 TRACE# 091000017546754

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## IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

If you need more information about an electronic transfer appearing on this statement, or if you think your statement or receipt is wrong, please telephone or write us as soon as possible at the phone number or address designated on the front of this statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- 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 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 (5 business days for Debit Card point of sale transaction) to do this, we will credit 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.

If you would like to confirm that an automatic deposit to your account has been made as scheduled, you may call us during normal business hours at the phone number designated on the front of this statement.

Date

## Reconciliation of Account

CHECKS/TRANSACTI	ONS NOT PAID	Date	
Check #/ACH/Debit Card	AMOUNT	Please examine this statement and items at once and report any exceptions immediately.	
		Sort your checks numerically or by date issued.	
		Mark off in your checkbook each of your transactions paid by the bank and list the descriptions and amounts of those not paid in the space provided at the left. Include any transactions still not paid from previous statements.  Subtract from your checkbook balance any SERVICE CHARGE (S.C.) or bank charge(s) appearing on this statement.  Reconcile your statement in the space provided below.	
		Enter bank balance	
		from statement	
		Add deposits not credited by bank (if any)	
		TOTAL	
Total of Transactions		Subtract total of Transactions not paid	

CSI REV 110121 6193-STMT

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MOMS CLUB OF CASTLE ROCK SW CO 651 HAMPSTEAD AVE CASTLE ROCK CO 80104-3237

DAILY BALANCE SUMMARY					
Date	Balance	Date	Balance	Date	Balance
6/01	1,221.01	6/16	1,147.07	6/28	1,090.40
6/05	1,246.01	6/23	1,107.65		