

CENNESSEE) P.O. BOX 638500 CINCINNATI OH 45263-0900 THE MOMS CLUB OF BRENTWOOD 351 WATSON VIEW DR FRANKLIN TN 37067-5970



Banking Center: Mill Creek Banking Center phone: 615-941-7589 Business Banking Support: 877-534-2264

menner Type: REGULAR BUS CHECKING Account Account Number: 7361118305

Statement regions we

2347

30

## Number of Days in Period Account Summary - 7361118305 \$180.00 \$1,387.57 \$(1,043.20) \$524.37 Beginning Balance Withdrawals / Debits Deposits / Credits **Ending Balance** Checks 10/90 06/30

\$0.00

\$0.00 \$0.00

Standard Monthly Service Charge Waived

Standard Monthly Service Charge

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

Service Charge withdrawn on 06/21/19

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hecks						3 Checks we	
+ Indicates gap in check sequence   = Electronic Image   s = Substitute Check Number Date Paid Amount Number Date i	e t = Electronic Image Amount	ge s = Substitt	ute Check Date Paid	Amount	Amount Number	Date Paid	Amount
06/2	171.20	10821		820.00	1083	06/24	22.00
Deposits / Credits	Amount D	Description	1			1 item to	1 item totaling \$180.00
06/20	180.00	DEPOSIT			-		
Daily Balance Summary Date	nary Amount	Date		Amount Date	. Date		Amount
06/20	1,567.57	06/24		72/90 75:569	06/27		104.02

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, PURCHASE ASSURANCE-POLICY NO. 84161537-03, AND MASTERCOVERAGE, GO TO WWW.53.COM/DEBIT. TO REQUEST WILL BE EFFECTIVE ON CALL 800-972-3030. THE POLICIES ARE ISSUED BY NEW HAMPSHIRE INSURANCE COMPANY, AN ALG CONPANY.