

RAMESH T KUMAR M D P A 11168 LANDS END CHASE PORT SAINT LUCIE FL 34986-3009

ACCOUNT # 0077558626

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LIFEGREEN BUSINESS CHECKING

March 1, 2024 through March 29, 2024

SUMMARY				
Beginning Balance	\$2,520.13	Minimum Balance	\$2,513	
Deposits & Credits	\$13,308.90 +	Average Balance	\$4,271	
Withdrawals	\$0.00 -	•		
Fees	\$8.00 -			
Automatic Transfers	\$0.00 +			
Checks	\$9,000.00 -			
Ending Balance	\$6,821.03			

	DEPOSITS & CREDITS		
03/01	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		304.11
03/04	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		228.36
03/04	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		2,029.78
03/05	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		194.40
03/06	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		736.26
03/07	EB From Checking # 0167842941 Ref# 000000 8643166		1,000.00
03/11	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		476.91
03/13	Optum VA Ccn Reg Hcclaimpmt Ramesh T Kumar 342019537		133.70
03/13	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		1,412.41
03/15	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		1,538.95
03/18	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		444.69
03/18	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		671.31
03/20	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		1,687.18
03/21	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		161.90
03/26	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		219.85
03/26	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		225.53
03/27	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		219.85
03/28	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		1,166.99
03/29	Unitedhealthcare Hcclaimpmt Ramesh T Kumar 342019537		456.72
	Т	otal Deposits & Credits	\$13,308.90

Total Doposito a Groatio \$10,000.0

FEES

03/11 Analysis Charge 02-24 8.00

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)





Regions Bank Okeechobee 305 East North Park Street Okeechobee, FL 34972

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CHECKS						
Date	Check No.	Amount		Date	Check No.	Amount
03/07	1179	4,500.00		03/18	1180	4,500.00
					Total Checks	\$9,000.00

^{*} Break In Check Number Sequence.

DAILY BALANCE SUMMARY					
Date	Balance	Date	Balance	Date	Balance
03/01	2,824.24	03/11	2,981.95	03/21	4,532.09
03/04	5,082.38	03/13	4,528.06	03/26	4,977.47
03/05	5,276.78	03/15	6,067.01	03/27	5,197.32
03/06	6,013.04	03/18	2,683.01	03/28	6,364.31
03/07	2,513.04	03/20	4,370.19	03/29	6,821.03

EFFECTIVE 2-1-24, THE FOLLOWING FEES
HAVE BEEN DISCONTINUED:
NON-REGIONS ATM BALANCE INQUIRY FEE
REGIONS ATM MINI STATEMENT FEE
STATEMENT PRINTOUT FEE
SPECIAL INTERIM STATEMENT FEE
COPY SERVICES FEE



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RANGERT RUMAR ND PA RECOGNESS (23/07/2021)

TOURS RAMER T. KUMAR ND PA S 4,500.98

FOUR TROUMON Five hundred a column country

WELLO DEP PIECE GLAGE

**COLITYET !: CESSIOLEEBI: 0077558EZET*



Check# 1179

03/07/2024

\$4500.00

Check# 1180

03/18/2024

\$4500.00

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	Amount
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 RI - Return Item CR - Credit SC - Service Charge OD - Overdrawn

EB - Electronic Banking NSF - Nonsufficient Funds APY - Annual Percentage Yield FWT - Federal Withholding Tax *Break in Number Sequence

You can make a deposit at the branch during business hours or at a Regions Deposit-Smart ATM, and you can also make a transfer or deposit through Regions Online Banking or Mobile Banking. To make a deposit to an overdrawn account 24 hours a day, please visit https://selfservice.regions.com.