Our P.O.Number must appear on all invoices, packing lists Vendor cartons, and correspondence.

(DUPLICATE)

Bill To: **Raytown C-2** 

Vendor:

6608 Raytown Road

Raytown, MO 64133-5265

Phone: (816) 268-7000

(816) 268-7063 Fax:

CARD SERVICES

Fax: (816) 843-2485

KANSAS CITY MO 64187-5852

PO BOX 875852

Email: financegroup@raytownschools.org

Tax Exempt Number:

12495239

Bid/Quote No:

Delivery Date:

Page No:

P.O.Date:

**Purchase Order No:** 

Requisition No:

24-0000-3346 Purchase Order No:

24-0000-3346

10/04/23

**ASAP** 

1

Ship to: RAYTOWN ADMINISTRATION BU

Attn: CALCARA

6608 RAYTOWN ROAD RAYTOWN, MO 64133 Phone: (816) 268-7000 Fax: (816) 268-7063

Vendor ID: 115223 Terms: Ship Via: Render Invoice in duplicate, enclosing one copy with merchandise and mailing other copy to central office ('BILL TO' address above). For all equipment purchases, serial numbers must be indicated on the invoice. Line Unit Part No. and Description Unit Price Qty Adjustment Amount Note: PLEASE SEND ALL INVOICES TO THE "SHIP TO" ADDRESS. All references to this purchase order (PO) including packing slip and invoice must contain this PO number in order to receive payment. HYVEE SUB INCENTIVE FRIDAY TREATS 19.68 0.00 19.68 001-2644-6411-0000-00222-1 Order Total ----> \$19.68

will Sean





# **Summary of Account Activity**

ourminary or moodument	J
Previous Balance	\$996.45
Payments/Debits	-\$0.00
Other Credits	-\$0.00
Purchases	+\$19.68
Cash Advances	+\$0.00
Fees Charged	+\$0.00
Interest Charged	+\$0.00
New Balance	= \$1,016.13

Credit Limit	\$3,000.00
Available Credit	\$1,983.87
Cash Advance Limit	\$750.00
Available for Cash Advance	\$750.00
Statement Closing Date	10/01/23
Days in Billing Cycle	30

# **Payment Information**

New Balance	\$1,016.13	
Minimum Payment Due	\$1,016.13	
Payment Due Date	10/27/23	
Past Due Amount	\$996.45	
Minimum Payment Due includes Past Due		
Amount and/or Overlimit Amount.		

Cardholder Name
CARL CALCARA
Payment Reference Number
00000588501
Account Number
XXXX XXXX XXXX
Page 1 of 4

#### **Payment Address:**

CARD SERVICES
PO BOX 875852
KANSAS CITY MO 6

KANSAS CITY MO 64187-5852

### **Contact Us:**

Telephoning about billing errors will not preserve your rights under federal law.

## \*IMPORTANT - You've missed a payment\*

Your account is past due. Please submit a payment equal to or greater than the Minimum Amount Due immediately. Disregard this notice if a payment has already been made.

If you are experiencing financial difficulties due to the current health pandemic, please contact us at 888.494.5141 to discuss payment options best suited to your needs. We are here to help.

Electronic statements will simplify your life, help you become more organized and are good for the environment. Sign up for eStatements today! Visit www.umb.com or use your mobile app, log in, click your credit card account tile, select **Settings** from the menu and then **Statement Preferences**. Set your preference to **Electronic Delivery**. We make up to 18 months of eStatements available to you at no cost. Your electronic **Account Statements** are accessible under the **Services** menu option.

### Late Payment Warning:

If we do not receive your minimum payment by the Payment Due Date, you may have to pay a late fee up to \$39.00.

If you are experiencing financial difficulties due to a recent natural disaster, please contact us at 888.494.5141 to discuss payment options best suited to your needs. We are here to help.

UMB will begin using text messaging to confirm suspicious transactions for credit cardholders with mobile phone numbers on record. Learn more about how UMB looks out for our customers by visiting UMB.com/fraudalerts.

**UMB** 

CARD CENTER PO BOX 419734 KANSAS CITY MO 64141-6734

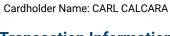
Please contact your company's program administrator for address changes. If you have any questions please contact 888-494-5141.

CARL CALCARA
RAYTOWN SCHOOL DISTRICT
RAYTOWN SCHOOL DIST #2
6608 RAYTOWN ROAD
RAYTOWN MO 64133

Account Number New Balance Payment Due Date Past Due Amount Minimum Payment Amount Enclosed XXXX XXXX XXXX \$1,016.13 10/27/23 \$996.45 \$1,016.13

CARD SERVICES PO BOX 875852 KANSAS CITY MO 64187-5852

Account Number: XXXX XXXX XXXX



# **Transaction Information**

Transaction Date	Posting Date	Reference Number	Description			Amount
09/01	09/03	24137463245001642419450	<b>HY-VEE RAYTOWN 1542</b>	<b>RAYTOWN</b>	MO	19.68

# **Interest Charge Calculation**

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

Type of Balance	Annual Percentage	Balance Subject to	Interest
	Rate (APR)	Interest Rate	Charge
PURCHASES	0.00%	\$19.68	\$0.00

(v) = Variable Rate