	Vendor (DUPLICATE)	Our P.O.Number must appear on all invoices, packing lists cartons, and correspondence. Tax Exempt Number:		Purchase Or Page No:		000-2199 I
ll To:	Raytown C-2 6608 Raytown Road			P.O.Date:	(09/03/24
	Raytown, MO 64133-5265 Phone: (816) 268-7000 Fax: (816) 268-7063	12495239	-		1	ASAP
	Email: financegroup@rayto	wnschools.org		Bid/Quote No:		
				Requisition No	:	
				Purchase Ord	er No: 25-0	000-2199
ndor:	CARD SERVICES PO BOX 875852 KANSAS CITY MO 64187-5852			Attn 1075 Ray	to: RAYTOWN SCHOOLS ED CONF Attn: KIM RECTOR 10750 East 350 HWY Raytown, Mo 64138	
	Fax: (816) 843-2485 Vendor ID: 115223			Fax:	ne: (816) 268-710 (816) 268-710	9
Terms:		Ship Via:	and mailing other c	uplicate, enclosing on opy to central office (ourchases, serial numb	'BILL TO' address at	oove).
Line	Qty Unit	Part No. and Description		Unit Price	Adjustment	Amount
						\$29.97

MAVAL





Summary of Account Activity

Previous Balance	\$2,700.00
Payments/Debits	-\$2,700.00
Other Credits	-\$0.00
Purchases	+\$29.97
Cash Advances	+\$0.00
Fees Charged	+\$0.00
Interest Charged	+\$0.00
New Balance	= \$29.97
Credit Limit	\$6,000.00
Available Credit	\$5,970.03
Cash Advance Limit	\$750.00
Available for Cash Advance	\$750.00
Statement Closing Date	09/01/24
Days in Billing Cycle	31

Payment Information

0	New Balance	\$29.97	
0	Minimum Payment Due	\$29.97	
0	Payment Due Date	09/27/24	
7	,		
0			
0			
00			
7			
0	Payment Address:		c
3	CARD SERVICES		
0	PO BOX 875852		
0	KANSAS CITY M0 64187-5852		
4	101000 011 100 04107-3032		4

Cardholder Name MATT VERLINDEN Payment Reference Number 00000588387 Account Number XXXX XXXX XXXX Page 1 of 4

Contact Us:

Lost/Stolen and	
General Inquiries:	
Alternate Number:	

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

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.

Transaction Information

Transaction Date	Posting Date	Reference Number	Description			Amount
08/08	08/09	24445004222400231596809	WM SUPERCENTER #1094	RAYTOWN	MO	29.97
		5411: GROCERY STORES, SUF	PERMARKETS 000064138			
08/11	08/11	74314474224000140595920	CHECK PAYMENT THANK Y	OU		- 2,700.00

		UMB
CARD CENTER PO BOX 419734 KANSAS CITY MO 64141-6734	Account Number New Balance	XXXX XXXX XXXX \$29.97
Please contact your company's program administrator for	Payment Due Date Minimum Payment	09/27/24 \$29.97
address changes. If you have any questions please contact 888-494-5141.	Amount Enclosed	

MATT VERLINDEN RAYTOWN SCHOOL DISTRICT RAYTOWN SCHOOLTECHNOLGY 10750 E 350 HWY RAYTOWN MO 64138 CARD SERVICES PO BOX 875852 KANSAS CITY MO 64187-5852

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%	\$0.00	\$0.00

(v) = Variable Rate