

Vendor (DUPLICATE) Bill To: Raytown C-2 6608 Raytown Road Raytown, MO 64133-5265 Phone: (816) 268-7000 Fax: (816) 268-7063 Email: financegroup@raytownschools.org	Our P.O.Number must appear on all invoices, packing lists cartons, and correspondence.		Purchase Order No: 25-8110-9796
			Page No: 1
			P.O.Date: 04/11/25
			Delivery Date: ASAP
			Bid/Quote No:
			Requisition No:
			Purchase Order No: 25-8110-9796

Vendor: CARD SERVICES PO BOX 875852 KANSAS CITY MO 64187-5852 Fax: (816) 843-2485 Vendor ID: 115223	Ship to: FACILITY OPERATIONS 5911 Blue Ridge RAYTOWN, MO 64133 Phone: (816) 268-7160 Fax: (816) 268-7165
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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	Qty	Unit	Part No. and Description		Unit Price	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.							
1.	1.00	Ea.	GUS''S FRIED CHCIEKN FOR ALL MAINT 001-2542-6411-8110-00000-1		606.00	0.00	606.00
Order Total ----->							\$606.00





Summary of Account Activity

Previous Balance	\$120.00
Payments/Debits	-\$120.00
Other Credits	-\$0.00
Purchases	+\$606.00
Cash Advances	+\$0.00
Fees Charged	+\$0.00
Interest Charged	+\$0.00
New Balance	= \$606.00

Credit Limit	\$3,000.00
Available Credit	\$2,394.00
Cash Advance Limit	\$0.00
Available for Cash Advance	\$0.00
Statement Closing Date	04/01/25
Days in Billing Cycle	30

Payment Information

New Balance	\$606.00
Minimum Payment Due	\$606.00
Payment Due Date	04/28/25

Payment Address:

CARD SERVICES
PO BOX 875852
KANSAS CITY MO 64187-5852

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

Cardholder Name	JOSH HUSTAD
Payment Reference Number	00000588442
Account Number	XXXX XXXX XXXX [REDACTED]
Page 1 of 4	

Contact Us:

Lost/Stolen and
General Inquiries: 888-494-5141
Alternate Number: 816-843-2000

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
03/07	03/09	24801975067265814729763	GUS'S FRIED CHICKEN LEE'S SUMMIT MO	606.00
		5812: EATING PLACES, RESTAURANTS	000064086	
03/24	03/24	74314475083000178201380	CHECK PAYMENT THANK YOU	- 120.00



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.

JOSH HUSTAD
RAYTOWN SCHOOL DISTRICT
5911 BLUE RIDGE BLVD
RAYTOWN MO 64133
RAYTOWN MO 64133-3932

Account Number	XXXX XXXX XXXX [REDACTED]
New Balance	\$606.00
Payment Due Date	04/28/25
Minimum Payment	\$606.00
Amount Enclosed	

CARD SERVICES
PO BOX 875852
KANSAS CITY MO 64187-5852

Cardholder Name: JOSH HUSTAD

Account Number: XXXX XXXX XXXX [REDACTED]

Interest Charge Calculation

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

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

(v) = Variable Rate
