

**Vendor
(DUPLICATE)**

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

Bill To: Raytown C-2
6608 Raytown Road
Raytown, MO 64133-5265
Phone: (816) 268-7000
Fax: (816) 268-7063
Email: financegroup@raytownschools.org

Tax Exempt Number:
12495239

| | |
|---------------------------|---------------------|
| Purchase Order No: | 24-0000-5776 |
| Page No: | 1 |
| P.O.Date: | 12/18/23 |
| Delivery Date: | ASAP |
| Bid/Quote No: | |
| Requisition No: | |
| Purchase Order No: | 24-0000-5776 |

Vendor: CARD SERVICES
PO BOX 875852
KANSAS CITY MO 64187-5852

Fax: (816) 843-2485
Vendor ID: 115223

Ship to: Raytown C-2
Attn: CHAVEZ
6608 Raytown Road
Raytown, MO 64133-5265
Phone: (816) 268-7000
Fax: (816) 268-7063

| | | |
|---------------|------------------|---|
| 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. | 24.750 | Ea. | MO SEC OF STATE NOTARY LICENSE FEE 001-3111-6391-0000-00228-1 | 0.00 | 0.00 | 0.00 |
| Order Total -----> | | | | | | \$0.00 |

House In Marble



Summary of Account Activity

| | |
|-------------------------|------------|
| Previous Balance | \$367.18 |
| Payments/Debits | -\$0.00 |
| Other Credits | -\$0.00 |
| Purchases | +\$25.75 |
| Cash Advances | +\$0.00 |
| Fees Charged | +\$0.00 |
| Interest Charged | +\$0.00 |
| New Balance | = \$392.93 |

Payment Information

| | |
|---|----------|
| New Balance | \$392.93 |
| Minimum Payment Due | \$392.93 |
| Payment Due Date | 12/27/23 |
| Past Due Amount | \$367.18 |
| Minimum Payment Due includes Past Due Amount and/or Overlimit Amount. | |

| | |
|--------------------------|---------------------------|
| Cardholder Name | M CLEAVER WAMBLE |
| Payment Reference Number | 00000588476 |
| Account Number | XXXX XXXX XXXX [REDACTED] |
| Page 1 of 4 | |

| | |
|----------------------------|------------|
| Credit Limit | \$3,000.00 |
| Available Credit | \$2,607.07 |
| Cash Advance Limit | \$0.00 |
| Available for Cash Advance | \$0.00 |
| Statement Closing Date | 12/01/23 |
| Days in Billing Cycle | 30 |

Payment Address:
 CARD SERVICES
 PO BOX 875852
 KANSAS CITY MO 64187-5852

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

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.



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.

M CLEAVER WAMBLE
 RAYTOWN SCHOOL DISTRICT
 RAYTOWN SCHOOL DISTRICT
 6608 RAYTOWN ROAD
 RAYTOWN MO 64133

| | |
|------------------|---------------------------|
| Account Number | XXXX XXXX XXXX [REDACTED] |
| New Balance | \$392.93 |
| Payment Due Date | 12/27/23 |
| Past Due Amount | \$367.18 |
| Minimum Payment | \$392.93 |
| Amount Enclosed | |

CARD SERVICES
 PO BOX 875852
 KANSAS CITY MO 64187-5852



Cardholder Name: M CLEAVER WAMBLE

Account Number: XXXX XXXX XXXX [REDACTED]

Transaction Information

| Transaction Date | Posting Date | Reference Number | Description | Amount |
|------------------|--------------|-------------------------|---|--------|
| 11/29 | 11/30 | 24540453333204600199305 | MO SEC OF STATE WWW.SOS.MO.GOMO 9399: GOVERNMENT SERVICES NOT ELSEWHERE CLASSIFIED 000065101 | 25.75 |

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% | \$25.75 | \$0.00 |

(v) = Variable Rate
