

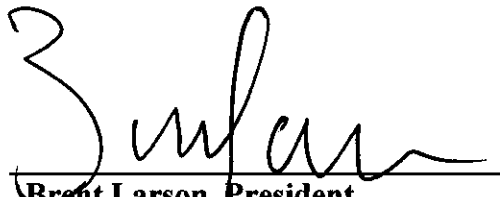
**ORDER: SPREAD ON THE MINUTES MONTHLY CREDIT CARD REPORT**

Motion was made by Tim Gordon, duly seconded by Scott Allen, to spread on the minutes monthly credit card report.

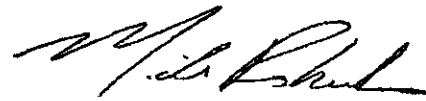
The vote on the motion was as follows:

Supervisor Brent Larson, voted yes  
Supervisor John Morgan, voted yes  
Supervisor Tim Gordon, voted yes  
Supervisor Scott Allen, voted yes  
Supervisor Greg Bynum, voted yes

After the vote, President Larson, declared the motion carried, this the 3<sup>rd</sup> day of June, 2024.



**Brent Larson, President  
Board of Supervisors**



**Mike Roberts, Chancery Clerk**



Visa® Business

Individual Account Summary

Credit Limit	\$16,500	Previous Balance	\$120.00
Available Credit	\$16,164	Payments	- \$120.00
Billing Date	05/17/24	Credits	- \$0.00
Days in Billing Cycle	30	Purchases/Other	
Payment Due Date	06/13/24	Debits/Other Fees	+ \$335.99
<b>Minimum Payment Due</b>	<b>\$10.00</b>	Cash Advances	+ \$0.00
		<b>Interest Charges</b>	<b>+ \$0.00</b>
		<b>Late Fees</b>	<b>+ \$0.00</b>
		<b>New Balance</b>	<b>\$335.99</b>

LAFAYETTE CTY SHERIFF DE  
JOSEPH B EAST

Account Number Ending In 0644  
Apr 18 - May 17, 2024

To ensure the proper credit, please include the payment coupon from this statement with your check. Failure to include this coupon can result in delayed processing and a late payment fee.

Interest Charges

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

Type of Balance	Periodic Rate	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
PURCHASES	0.05066% (d)	18.490% (v)	\$0.00	\$0.00

(d) Daily Periodic Rate  
(m) Monthly Periodic Rate  
(v) Variable Rate

Account Inquiries

Visit us online at www.regions.com	Call Customer Service, for Billing Inquiries or to Report a Lost or Stolen Card 1-800-253-2265 TTY 1-800-374-5791	Send Billing Inquiries To: P.O. BOX 216 BIRMINGHAM, AL 35201-0216	Mail Payments To: P.O. BOX 2224 BIRMINGHAM, AL 35246-3042
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DETACH HERE: to ensure the proper credit, please include lower portion with your payment.

REGIONS BANK  
P.O. BOX 11007  
BIRMINGHAM AL 35288-0001



3042410063000916064400033599000010004

REGIONS COMMERCIAL BANKCARD  
P.O. BOX 2224  
BIRMINGHAM AL 35246-3042

Account Number Ending In 0644  
Payment Due Date 06/13/24  
Minimum Payment Due \$10.00  
New Balance \$335.99

JOSEPH B EAST  
LAFAYETTE CTY SHERIFF DE  
PO BOX 1240  
OXFORD MS 38655-1240

\*\*N0002956

Amount Enclosed \$ \_\_\_\_\_

Make check or money order payable to:  
Regions Bank

4 10063 5000 206 0009160644 20

**Cardholder Activity**

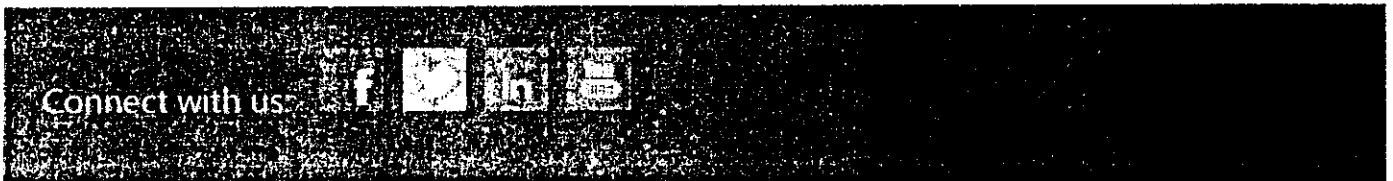
Tran Date	Post Date	Category	Reference Number	Transactions	Amount
04/23	04/24	7011	24943004114968594270798	IP-MS ADV DEPOSIT 6014364555 MS Check in Date: 06/02/24 Daily Rate \$0.00 Taxes: \$0.00	55.99
04/24	04/26	8641	24071054116939130812226	NATIONAL SHERIFFS ASSO ALEXANDRIA VA	280.00
05/13	05/13	0000	0020	PAYMENT - THANK YOU	120.00 CR



Name on Card: Joseph B East

Item	Price	Quantity	Total
Adjustments for invoice: Cash-315215 - Sheriff Joseph B. East	30.00	1	30.00
Invoice Cash-315215: Renewal Fees - Sheriff Joseph B. East	250.00	1	250.00
			<b>Item Total</b> 30.00
			<b>Shipping</b> 0.00
			<b>Handling</b> 0.00
			<b>Item Grand Total</b> 30.00
			<b>Invoice Total</b> 250.00
			<b>Transaction Grand Total</b> 280.00
			<b>Payment Amount</b> 280.00
			<b>Balance due</b> 0.00

Thank you again for your support!



**Anne M. Conerly**

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**From:** Alicia Watts  
**Sent:** Tuesday, April 23, 2024 2:13 PM  
**To:** Purchasing Accounts Payable  
**Subject:** Sheriff's card



*Alicia M. Watts*

**From:** Dustin Black <DBlack@lafayettesheriff.net>  
**Sent:** Tuesday, April 23, 2024 1:56 PM  
**To:** Alicia Watts <AMWatts@lafayettesheriff.net>  
**Subject:** Fwd: IP Casino Resort Spa Reservation Confirmation

Sent from my iPhone

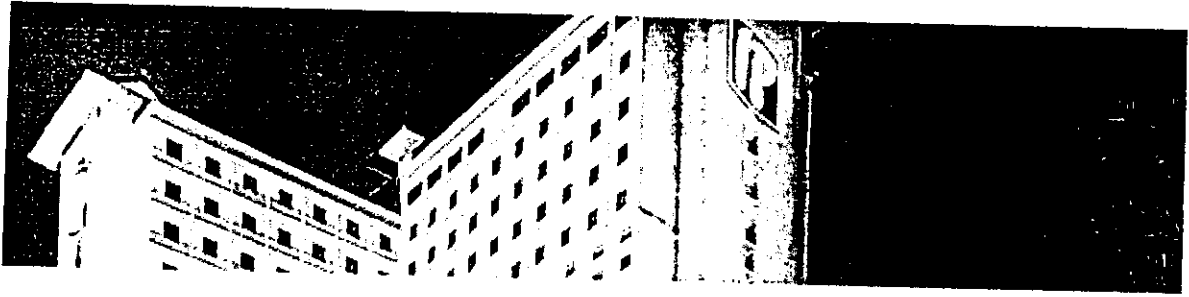
Begin forwarded message:

**From:** IP Casino Resort Spa <[donotreply@boydgamingemail.com](mailto:donotreply@boydgamingemail.com)>  
**Date:** April 23, 2024 at 13:54:38 CDT  
**To:** "DUSTIN BLACK" <DUSTIN BLACK>  
**Subject:** IP Casino Resort Spa Reservation Confirmation

You don't often get email from [donotreply@boydgamingemail.com](mailto:donotreply@boydgamingemail.com). [Learn why this is important](#)

IP Casino Resort Spa Reservation Confirmation





## CONFIRMATION INFORMATION

Dear DUSTIN BLACK ,

Please take a moment to review your reservation information below. You can make changes to this reservation by calling 877-335-4831.

Here are your reservation details:

Name:	DUSTIN BLACK
Confirmation Number:	5BSTY
Arrival Date:	Sunday, 06/02/2024
Departure Date:	Friday, 06/07/2024
Check-in Time:	04:00 PM
Check-out Time:	11:00 AM
Number of Nights:	5
Number of Rooms:	1
Room Type:	IP/D1
Room Description:	STD KING NONSMK

Please note a refundable deposit equal to the first nights' room and tax will be charged on your credit card at the time of booking to guarantee your reservation. Cancellations must be made at least 24 hours prior to arrival to avoid forfeiting the deposit amount unless a non-refundable offer is booked, then no refund is provided. Packages offers and special events may require different deposits and cancellation periods. \$100 authorization is required at check-in. Reservations are non-transferrable. Rates do not include the nightly resort fee of \$16.05 (tax included) which will be charged at check-in.

### Reservation Information

Stay Total:	249.95
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Stay Tax: 30.00  
Stay Total w/Tax: 279.95  
Deposit Received: 55.99

Date	Rate	Nights
6/02/24	55.99	5

This is an automated message. Please call 877-335-4831 if you have any questions or would like to make changes to your reservation.



**IP Casino Resort Spa - Biloxi**  
850 Bayview Avenue • Biloxi, MS 39530  
[ipbiloxi.boydgaming.com](http://ipbiloxi.boydgaming.com)  
1-888-946-2847

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