

Statement

Account Name: WALSH, IMOGENE **Card Number: Company Name:** BATTLE RIVER RD #31 **Account Limit:**

Employee ID:

Statement Date (MM/DD/YYYY): 01/03/2024 CANADIAN DOLLAR **Currency:**

Statement Summary:

Report any items which do not agree with your records

within 30 days of the statement date.

Payments:	\$ 0.00
Adjustments:	\$ 0.00
Net Purchases:	\$ 297.61
Cash Advance:	\$ 0.00
Fees:	\$ 0.00
Other Charges:	\$ 0.00
New Account Balance:	\$ 297.61

For your records only. No payment required.

Transaction Summary:

Trans Date	Posting Date Trans ID	Description	Pre-Tax Amount Auth #	Total Tax	Trans Amount
12/05	12/07 507105220	HOLIDAY INN & SUITES NISKU AB	\$ 248.08 017658	\$ 12.40 (e)	\$ 260.48
12/07	12/08 507456083	BASHAW EATS BASHAW AB	\$ 35.36 032211	\$ 1.77 (e)	\$ 37.13

TOTAL CREDITS xxxx-xxxx-xxxx-2168 \$ 0.00 TOTAL DEBITS xxxx-xxxx-xxxx-2168 \$ 297.61