

Statement

Account Name:	WALSH, IMOGENE	Card Number:	██████████
Company Name:	BATTLE RIVER RD #31	Account Limit:	██████████
Employee ID:	██████████		
Statement Date (MM/DD/YYYY):	02/03/2023	Currency:	CANADIAN DOLLAR

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:	\$ 271.57
Cash Advance:	\$ 0.00
Fees:	\$ 0.00
Other Charges:	\$ 0.00
New Account Balance:	\$ 271.57

For your records only. No payment required.

Transaction Summary:

Trans Date	Posting Date Trans ID	Description	Pre-Tax Amount Auth #	Total Tax	Trans Amount
01/16	01/17 455874275	LA PIAZZA VIKING VIKING AB	\$ 36.70 033284	\$ 1.83 (e)	\$ 38.53
01/24	01/25 457027148	EVENTBRITE SAINT JOHN NB	\$ -60.85 216293	\$ -9.13 (e)	\$ -69.98
01/29	01/30 457643066	VILLAGE CREEK COUNTRY WESTEROSE AB	\$ 288.59 017898	\$ 14.43 (e)	\$ 303.02

TOTAL CREDITS	xxxx-xxxx-xxxx-2168	\$ -69.98
TOTAL DEBITS	xxxx-xxxx-xxxx-2168	\$ 341.55