

Statement

Account Name:	WILM, NATASHA	Card Number:	██████████
Company Name:	BATTLE RIVER RD #31	Account Limit:	██████████
Employee ID:	██████████		
Statement Date (MM/DD/YYYY):	06/03/2023	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:	\$ 25.00
Cash Advance:	\$ 0.00
Fees:	\$ 0.00
Other Charges:	\$ 0.00
New Account Balance:	\$ 25.00

For your records only. No payment required.

Transaction Summary:

Trans Date	Posting Date Trans ID	Description	Pre-Tax Amount Auth #	Total Tax	Trans Amount
05/29	05/30 475849823	COLLEGE OF ALBERTA SCH 780-540-9205 AB	\$ 23.81 079427	\$ 1.19 (e)	\$ 25.00

TOTAL CREDITS	xxxx-xxxx-xxxx-2135	\$ 0.00
TOTAL DEBITS	xxxx-xxxx-xxxx-2135	\$ 25.00