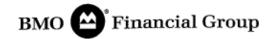


p-CARD SUMMARY FORM

ATTACH STATEMENT AND RECEIPTS TO THIS FORM

Cardholder: (Please Print)	Deanne Hillman			Credit Card No.: XXXX XXXX XX					
Building:	Keil Building			Statement Date: 1/5/20					
Transaction Date	Ve	ndor	Purchase Description	Purpose of Purchase	Amount	Account Number	Receipt Enclosed (X)		
12/10/2018	Jimmy John's		Sandwiches	Food for DFTA Negotiations team and BOE members	\$58.50	10.00.2640.0000.0.410	×		
				TOTAL CHARGES (Must Match Statement)	\$ 58.50				
Cardholder S	Signature:	learne H	llmu	,	Date:	January 10, 2020			
	ager Approval:	Ranne She Raul Jrag	<u> </u>		Date:	January 10,2	2020		
		1	1						



Statement

Account Name:

HILLMAN, DEANNE

Card Number:

XXXX-XXXX-XXXX-

Company Name:

DECATUR PUBLC SCH DIST 61

Account Limit:

\$5,000.00

Employee ID:

7999993262022563

Statement Date (MM/DD/YYYY):

01/05/2020

Currency:

U.S. 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: \$ 58.50

Cash Advance: \$ 0.00

\$ 0.00 Fees:

\$ 0.00 Other Charges: New Account Balance: \$ 58.50

For your records only. No payment required.

Transaction Summary:

Trans Date	Posting Date Trans ID	Description	Pre-Tax Amount Auth #	Total Tax	Trans Amount
12/16	12/17 327045394	JIMMY JOHNS - 502 217-519-2682 IL	 \$ 53.55 036107	\$ 4.95 (e)	\$ 58.50

TOTAL CREDITS XXXX-XXXX \$ 0.00 TOTAL DEBITS XXXX-XXXX-XXXX \$ 58.50

Quem Helm



Jimmy Johns #502 154 North Merchant St 217-423-8323

12-16-2019 Chk# 6 Open 10:26 AM Tkr 17 Reg# 5 10:26 AM > D508 <

> 30Pc Party Box (C) ..NO MAYO ALL

58.50

#1 Peps

Pepe

..#4 Turkey Tom ..#4 Turkey Tom

..#4 Turkey Tom

#4 Turkey Tom

.#2 Big John .#2 Big John

IAKE mayo packet\$

58.50 Subtotal Sales Tax (11.25%) Exempt

*** PAID ***

Credit Tendered 58.50 Tip 0.00

Pub Sch

Order Taker: Jason

Delivery charges are not distributed to employees as tips