



Statement For Board

FIFTH THIRD BANK

Account Number: XXXX XXXX XXXX

NEWPORT IND SCHOOL DIST

Statement Closing Date: 10/31/25

Page 1 of 2

Corporate Account Summary

Previous Balance		\$3,052.85
Payments	-	\$3,052.85
Credits	-	\$0.00
Purchases and Other Charges	+	\$5,645.20
Cash Advances	+	\$0.00
Late Payment Charge	+	\$0.00
Cash Advance Fees	+	\$0.00
Finance Charges	+	\$0.00
New Balance		\$5,645.20
Disputed Amount		\$0.00
Past Due Amount		\$0.00
Credit Limit		\$100,000.00
Available Credit Limit		\$94,354.80
Cash Advance Credit Limit		\$0.00
Available Cash Advance Credit Limit		\$0.00
Statement Closing Date		10/31/25
Days in Billing Cycle		31

Payment Information

New Balance	\$5,645.20
Minimum Payment Due	\$5,645.20
Payment Due Date	11/25/25

QUESTIONS OR TO REPORT LOST/STOLEN CARDS?

Call Customer Service 1-800-375-1747

Please send billing inquiries and correspondence to:

FIFTH THIRD BANK
PO BOX 740523
CINCINNATI, OH 45274-0523

Or email inquiries to CommercialSupport@53.com

Corporate Account Activity

Post Date	Tran Date	Reference Number	Transaction Description	Amount
10/27	10/27		AUTO PAYMENT DEDUCTION	-\$3,052.85

Finance Charge Summary

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Finance Charge	Finance Charge
PURCHASES	19.80%	\$0.00	\$0.00
CASH ADVANCES	19.80%	\$0.00	\$0.00

Cardholder Account Summary

Name and Account Number	Credit Limit	Credits	Purchases	Cash Advances	Total Activity
NEWPORT ISD 1 XXXX XXXX XXXX	\$10,000	\$0.00	\$44.42	\$0.00	\$44.42
NEWPORT ISD 3 XXXX XXXX XXXX	\$10,000	\$0.00	\$245.98	\$0.00	\$245.98

(summary continued on next page)

Detach and return lower portion with your payment. Please retain above portion.



FIFTH THIRD BANK
FIFTH THIRD BANK
PO BOX 740523
CINCINNATI, OH 45274-0523

RECEIVED NOV 12 2025

Account Number XXXX XXXX XXXX
Payment Due Date 11/25/25
Amount Due \$5,645.20
Current Balance \$5,645.20

You are enrolled in automatic payments.
Your payment will be automatically debited
on the payment due date.

NEWPORT IND SCHOOL DIST
CORPORATE BILLING ACCT
C/O
30 W 5TH ST
NEWPORT KY 41071-1352

***N0003417

FIFTH THIRD BANK
PO BOX 740523
CINCINNATI, OH 45274-0523



0321008922000894 0005645205 0005645205



Cardholder Account Summary cont.

Name and Account Number	Credit Limit	Credits	Purchases	Cash Advances	Total Activity
NEWPORT ISD 4 XXXX XXXX XXXX	\$15,000	\$0.00	\$1,080.00	\$0.00	\$1,080.00
KIMBERLY CORNETT XXXX XXXX XXXX	\$20,000	\$0.00	\$33.40	\$0.00	\$33.40
KIM KLOSTERMAN XXXX XXXX XXXX	\$10,000	\$0.00	\$4,241.40	\$0.00	\$4,241.40

Cardholder Account Activity

NEWPORT ISD 1 XXXX XXXX XXXX	Credit Limit \$10,000	Credits \$0.00	Purchases \$44.42	Cash Advances \$0.00	Total Activity \$44.42
---------------------------------	--------------------------	-------------------	----------------------	-------------------------	---------------------------

Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
10/27	10/24	05436845297300251517022	SAMS CLUB.COM BENTONVILLE AR		\$44.42 -1

NEWPORT ISD 3 XXXX XXXX XXXX	Credit Limit \$10,000	Credits \$0.00	Purchases \$245.98	Cash Advances \$0.00	Total Activity \$245.98
---------------------------------	--------------------------	-------------------	-----------------------	-------------------------	----------------------------

Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
10/24	10/23	51043235296067315136826	SERFINITMED 6467010070 CA		\$245.98 -2

NEWPORT ISD 4 XXXX XXXX XXXX	Credit Limit \$15,000	Credits \$0.00	Purchases \$1,080.00	Cash Advances \$0.00	Total Activity \$1,080.00
---------------------------------	--------------------------	-------------------	-------------------------	-------------------------	------------------------------

Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
10/03	10/02	89101785275500234660052	CAPSULE CRM MANCHESTER LND		\$1,080.00 -3

KIMBERLY CORNETT XXXX XXXX XXXX	Credit Limit \$20,000	Credits \$0.00	Purchases \$33.40	Cash Advances \$0.00	Total Activity \$33.40
------------------------------------	--------------------------	-------------------	----------------------	-------------------------	---------------------------

Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
10/02	10/01	05436845274300276599341	KROGER #423 NEWPORT KY		\$12.87 -4
10/14	10/13	05436845286300268134665	KROGER #423 NEWPORT KY		\$20.53 -5

KIM KLOSTERMAN XXXX XXXX XXXX	Credit Limit \$10,000	Credits \$0.00	Purchases \$4,241.40	Cash Advances \$0.00	Total Activity \$4,241.40
----------------------------------	--------------------------	-------------------	-------------------------	-------------------------	------------------------------

Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
10/08	10/07	87021305280500154782069	COSSBA EVE* REGCNOQU5S SPRINGFIELD IL		\$1,025.00 -6
10/08	10/07	87021305280500148083038	COSSBA EVE* REGKH60VK4 SPRINGFIELD IL		\$3,075.00 -7
10/14	10/13	51742955287111422084301	IDENTOGO - KY FINGERPR BEDFORD MA		\$54.00 -8
10/27	10/24	51742955298113970106525	IDENTOGO - KY FINGERPR BEDFORD MA		\$54.00 -9
10/31	10/30	02305375304000665050669	USPS PO 2056520671 NEWPORT KY		\$33.40 -10

MC November Board			
Vendor	Used For	Invoice	Invoice Amt
Sam's Club	NHS Concession	#800000000752555	44.42
Serfinitimed	Sp Ed -Ero ScanSupplies	#SM263124	245.98
Capsule CRM	NALC - 1 YR Subscription	#295032-00073	1,080.00
Kroger	NPS Foos Service	# 100115130818	12.87
Kroger	NHS Foos Service	1013501370809	20.53
COSSBA	Brd Member Registration	#REGCNOQU5SZ	1,025.00
COSSBA	Brd Members Registration	# REGKH60VK49	3,075.00
INDENTOGO	Fingerprint October 2025	FINGERPRINT OCT #1	54.00
INDENTOGO	Fingerprint October 2025	FINGERPRINT OCT #2	54.00
USPS	Overnight Letter	USPS TRANS # 721	33.40
			5,645.20



Oct 23, 2025

Order 800000000752555



Curbside pickup items(3)

Florence Sam's Club

4949 HOUSTON RD

Florence, KY 41042

Date

Blow Pops Assorted Mix, 100 pcs.

Qty 3

\$41.91

Subtotal

\$41.91

Pickup

FREE

Tax

\$2.51

Total

\$44.42

Ending in 6689

\$44.42

Credit cards aren't charged until your order ships or you pick it up at the club. If you see a pending charge before this, it's an authorization hold to ensure the funds are available

NHS Concession

#1

Order #SM263124 confirmed

From Serfinity Medical <support@serfinity.com>
Date Tue 10/21/2025 2:56 PM
To Hall, Angela <angie.hall@newport.kyschools.us>

You don't often get email from support@serfinity.com. [Learn why this is important](#)

[This message originated outside the Newport Independent School District]

Serfinity Medical

ORDER #SM263124

Thank you for your purchase!

We're getting your order ready to be shipped. We will notify you when it has been sent.

[View your order](#) or [Visit our store](#)

Order summary



Maico Diagnostics - Eartip and Probe Tube Kit For Ero-
Scan - 8029306 × 2
Box of 610

\$245.98

Subtotal	\$245.98
Shipping	\$0.00
Taxes	\$0.00

Total **\$245.98 USD**

Sp. Ed Ero Scan Supplies
Grant - IDEA B

#2

RECEIPT / TAX INVOICE

Capsule

To

Campbell County Adult Education
30 W 8th St
Newport, KY 41071
United States

A service of Zestia Ltd
Company No. 6418281

20 Dale Street
Manchester M1 1EZ
United Kingdom

support@capsulecrm.com

Invoice Date

Oct 2, 2025

Invoice Number (please quote if contacting us about this invoice)

295032-00073

Account URL

<https://ccsu.capsulecrm.com>

Description	Amount USD
Capsule annual subscription for Sep 28, 2025 to Sep 27, 2026. 5 users @ \$18 per month	1080.00
<hr/>	
Subtotal	1080.00
<hr/>	
Total USD	1080.00

Automatic debit - no action required

Payment for this invoice has been taken from your card *****6754. This charge will appear on your credit card statement as "CAPSULECRM.COM *ZESTIA".

NALC - 1 year subscription
NALC - Grant

#3



Order Type: In Store
Order Date: Oct. 1, 2025
Order Number: 014~00423~2025-10-01~15~130818
Loyalty Card (last 4): #0163



Kroger
130 Pavilion Pkwy
Newport, KY 41071 USA

Order Summary

Original Item Total	\$12.87
Sales Tax	\$0.00
Order Total	\$12.87

Item Details

3 Items

Country Crock Light Vegetable Oil Spread, 45 oz	\$6.49
1 x \$6.49 each	
UPC: 0002740026497	
Smart Way™ Granulated Sugar, 4 lb	\$6.38
2 x \$3.19 each	
UPC: 0001111011888	

Payment Details

TERMINAL ID 15

MASTERCARD 5690	\$12.87
-----------------	---------

www.kroger.com
1-800-KRO-GERS (1-800-576-4377)

NPS Food Service

#4



Order Type: In Store

Order Date: Oct. 13, 2025

Order Number: 014~00423~2025-10-13~501~370809

Loyalty Card (last 4): #0163



Kroger

130 Pavilion Pkwy

Newport, KY 41071 USA

Order Summary

Original Item Total	\$20.53
Sales Tax	\$0.00
Order Total	\$20.53

Item Details

9 Items

Fresh Large Green Bell Pepper, 1 ct	\$1.98
2 x \$0.99 each	
UPC: 0000000004065	
Green Onions, 1 each	\$1.98
2 x \$0.99 each	
UPC: 0000000004068	
Kroger® Tri-Color Bell Peppers, 20 oz	\$7.98
2 x \$3.99 each	
UPC: 0001111091116	
Kroger® Vine Ripe Tomatoes, 20 oz	\$6.38
2 x \$3.19 each	
UPC: 0001111091688	
Sweet Jumbo Yellow Onions, 1 ct	\$2.21
1.31 lbs x \$1.68 each (approx.)	
UPC: 0000000004166	

Payment Details

TERMINAL ID 501

MASTERCARD 5690

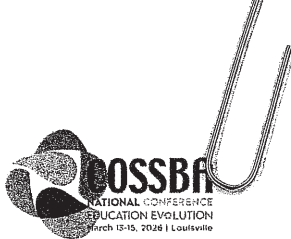
NHS Food Service

\$20.53

www.kroger.com

1-800-KRO-GERS (1-800-576-4377)

#5



Receipt: 2026 COSSBA National Conference + UBA Preconference Day

Payment Status: Paid
Registration ID: REGCNOQU5SZ
Registration Date: October 7, 2025

Receipt ID: 2026NATIONALCONFERENCE-CNOQU5SZ
Issue Date: October 7, 2025

Kim Klosterman
Newport Board of Education, Kentucky School Boards Association
kim.klosterman@newport.kyschools.us

30 W. 8th Street
Newport, Kentucky
41071, United States

Item	Owner	Download / Status	USD
Early Bird COSSBA National Conference Registration + Preconference Day	Ed Davis	PURUXQCXYKE	1,025.00
Total			1,025.00
Amount Paid			1,025.00
Amount Due			0.00

Payment	Date	Status	Transaction ID	USD
CCARD	October 7, 2025	Verified	ch_3SFaYtFsceQy5xPi0nSFwbup	1,025.00

Please send checks to the address on the invoice!

Check Maildrop Address Below:

COSSBA
P O Box 55026
Lexington, Kentucky 40555

ACH Payments can be made as well:

Chase Bank

ABA-322271627 | Account Number-962583982

COSSBA's W9 for your records.

Registration substitutions are welcome. All cancellations are subject to a \$100 administrative fee. Any cancellations received after February 16, 2026 are subject to the full registration fee. No refunds will be given after February 16, 2026.

COSSBA
2026 National Conference
Registration

#6



Receipt: 2026 COSSBA National Conference + UBA Preconference Day

Payment Status: Paid
Registration ID: REGKH60VK49
Registration Date: October 7, 2025

Receipt ID: 2026NATIONALCONFERENCE-KH60VK49
Issue Date: October 7, 2025

Kim Klosterman
Newport Board of Education, Kentucky School Boards Association
kim.klosterman@newport.kyschools.us

30 W. 8th Street
Newport, Kentucky
41071, United States

Item	Owner	Download / Status	USD
Early Bird COSSBA National Conference Registration + Preconference Day	Bobbie Stubbeman	PURU5TPU53N	1,025.00
Early Bird COSSBA National Conference Registration + Preconference Day	Matt Atkins	PUR7XH5CVM9	1,025.00
Early Bird COSSBA National Conference Registration + Preconference Day	Ramona Malone	PURLHH7PENH	1,025.00
Total			3,075.00
Amount Paid			3,075.00
Amount Due			0.00

Payment	Date	Status	Transaction ID	USD
CCARD	October 7, 2025	Verified	ch_3SFaCYFsceQy5xPi0LvEIft	3,075.00

Please send checks to the address on the invoice!

Check Maildrop Address Below:

COSSBA
P O Box 55026
Lexington, Kentucky 40555

ACH Payments can be made as well:

Chase Bank

ABA-322271627 | Account Number-962583982

COSSBA's W9 for your records.

COSSBA
2026 National Conference
Registration

#7

IDENTOGO – Fingerprint

10/13/25 - AshLynn Hensley – Coach - \$54.00

10/27/25 – Jennifer Noel Custodian - \$54.00

October Fingerprint

8 & 9

Overnite Ltr to



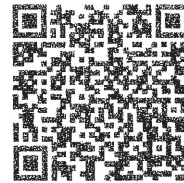
NEWPORT
420 COLUMBIA ST
NEWPORT, KY 41071-9998
www.usps.com

10/30/2025

10:57 AM

TRACKING NUMBERS
ER235770605US

TRACK STATUS OF ITEMS WITH THIS CODE
(UP TO 25 ITEMS)



TRACK STATUS BY TEXT MESSAGE
Send tracking number to 28777 (2USPS)
Standard message and data rates may apply

TRACK STATUS ONLINE
Visit <https://www.usps.com/tracking>
Text and e-mail alerts available

PURCHASE DETAILS

Product	Qty	Unit Price	Price
PM Express	1		\$33.40
Flat Rate Env			
Cincinnati, OH 45245			
Flat Rate			
Signature Waiver			
Scheduled Delivery Date			
— Fri 10/31/2025 06:00 PM			
Money Back Guarantee			
Tracking #:			
ER235770605US			
Insurance			\$0.00
Up to \$100.00 included			
Total			\$33.40

Grand Total: \$33.40

Credit Card Remit \$33.40

Card Name: MasterCard
Account #: XXXXXXXXXXXXX1822
Approval #: 032705
Transaction #: 721
AID: A0000000041010 Chip
AL: MASTERCARD
PIN: Not Required

Overnite Letter

#10