



# Statement For Board

## FIFTH THIRD BANK

Account Number: XXXX XXXX XXXX

NEWPORT IND SCHOOL DIST

Statement Closing Date: 07/31/24

Page 1 of 4

### Corporate Account Summary

Previous Balance		\$18,629.35
Payments	-	\$18,629.35
Credits	-	\$0.00
Purchases and Other Charges	+	\$23,035.86
Cash Advances	+	\$0.00
Late Payment Charge	+	\$0.00
Cash Advance Fees	+	\$0.00
Finance Charges	+	\$0.00
<b>New Balance</b>		<b>\$23,035.86</b>
Disputed Amount		\$0.00
Past Due Amount		\$0.00
Credit Limit		\$100,000.00
Available Credit Limit		\$76,964.14
Cash Advance Credit Limit		\$0.00
Available Cash Advance Credit Limit		\$0.00
Statement Closing Date		07/31/24
Days in Billing Cycle		33

### Payment Information

New Balance	\$23,035.86
Minimum Payment Due	\$23,035.86
Payment Due Date	08/26/24

#### 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](mailto:CommercialSupport@53.com)

RECEIVED AUG 05 2024

### Corporate Account Activity

Post Date	Tran Date	Reference Number	Transaction Description	Amount
07/23	07/23		AUTO PAYMENT DEDUCTION	-\$18,629.35

### 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
TONY WATTS XXXX XXXX XXXX	\$5,000	\$0.00	\$1,336.87	\$0.00	\$1,336.87
LISA RIZZO XXXX XXXX XXXX	\$20,000	\$0.00	\$467.92	\$0.00	\$467.92

(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

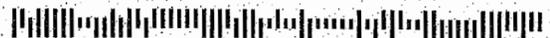
Account Number XXXX XXXX XXXX  
Payment Due Date 08/26/24  
Amount Due \$23,035.86  
Current Balance \$23,035.86

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 JENNIFER HOOVER  
30 W 8TH ST  
NEWPORT KY 41071-1352

\*\*N0013286

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



0321008922000894 0023035868 0023035868



32101FAC - 013286 - 0001 - 0002 - 2

**Cardholder Account Summary cont.**

Name and Account Number	Credit Limit	Credits	Purchases	Cash Advances	Total Activity
NEWPORT ISD 1 XXXX XXXX XXXX	\$10,000	\$0.00	\$0.02	\$0.00	\$0.02
NEWPORT ISD 2 XXXX XXXX XXXX	\$10,000	\$0.00	\$2,006.65	\$0.00	\$2,006.65
NEWPORT ISD 3 XXXX XXXX XXXX	\$10,000	\$0.00	\$615.54	\$0.00	\$615.54
NEWPORT ISD 4 XXXX XXXX XXXX	\$15,000	\$0.00	\$11,310.40	\$0.00	\$11,310.40
JENNIFER HOOVER XXXX XXXX XXXX	\$25,000	\$0.00	\$7,186.40	\$0.00	\$7,186.40
KIM KLOSTERMAN XXXX XXXX XXXX	\$10,000	\$0.00	\$112.06	\$0.00	\$112.06

**Cardholder Account Activity**

TONY WATTS XXXX XXXX XXXX	Credit Limit	Credits	Purchases	Cash Advances	Total Activity
	\$5,000	\$0.00	\$1,336.87	\$0.00	\$1,336.87

Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
07/12	07/11	52653844193718868699527	HOTELBOOKINGSERVFEE 8007279059 UT 07/11/24 0086869952		\$15.99
07/12	07/11	55429504193717899353001	RESDESK*EMBASSY SUITES 8007742354 CT		\$605.56
07/26	07/24	85353354207429425669691	NABSE 8337622731 DC		\$156.00
07/26	07/24	85353354207429426358872	NABSE 8337622731 DC		\$463.92
07/29	07/26	55436874209262097420401	EMBASSY SUITES LOUISVILLE KY 07/24/24 549320		\$95.40

LISA RIZZO XXXX XXXX XXXX	Credit Limit	Credits	Purchases	Cash Advances	Total Activity
	\$20,000	\$0.00	\$467.92	\$0.00	\$467.92

Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
07/23	07/22	05436844204300221062385	KROGER #423 NEWPORT KY		\$106.90
07/23	07/21	05436844204200057537007	GFS STORE #0713 CINCINNATI OH		\$338.63
07/24	07/23	55506294205037476274482	MARCELLA'S DOUGHNUTS & CINCINNATI OH		\$22.39

NEWPORT ISD 1 XXXX XXXX XXXX	Credit Limit	Credits	Purchases	Cash Advances	Total Activity
	\$10,000	\$0.00	\$0.02	\$0.00	\$0.02

Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
07/01	06/29	55432864182206978993131	GAYLORD ROCKIES RESORT AURORA CO 06/26/24 20781		\$0.01
07/01	06/29	55432864182206978993156	GAYLORD ROCKIES RESORT AURORA CO 06/26/24 20784		\$0.01

NEWPORT ISD 2 XXXX XXXX XXXX	Credit Limit	Credits	Purchases	Cash Advances	Total Activity
	\$10,000	\$0.00	\$2,006.65	\$0.00	\$2,006.65

Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
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(transactions continued on next page)

**Cardholder Account Activity cont.**

07/16	07/15	55417344198871981630147	DELTA 00622514590541 DELTA.COM CA PAYNE/DARLA 11/19/24 CVG ATL CVG	\$312.96
07/16	07/15	55417344198871981623019	DELTA 00622519565975 DELTA.COM CA BROWN/KATINA 11/19/24 LEX ATL LEX	\$437.96
07/29	07/26	55432864208205592045492	4IMPRINT, INC 4IMPRINT.COM WI	\$1,255.73

NEWPORT ISD 3 XXXX XXXX XXXX		Credit Limit \$10,000	Credits \$0.00	Purchases \$615.54	Cash Advances \$0.00	Total Activity \$615.54
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Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
07/17	07/16	55436874199171992177069	SIGNIA ATLANTA CONV ATLANTA GA 07/16/24 101600		\$307.77
07/17	07/16	55436874199171992177580	SIGNIA ATLANTA CONV ATLANTA GA 07/16/24 101597		\$307.77

NEWPORT ISD 4 XXXX XXXX XXXX		Credit Limit \$15,000	Credits \$0.00	Purchases \$11,310.40	Cash Advances \$0.00	Total Activity \$11,310.40
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Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
07/02	06/30	55432864183207310846358	GAYLORD ROCKIES RESORT AURORA CO 06/26/24 25603		\$106.87
07/02	06/30	55432864183207310846366	GAYLORD ROCKIES RESORT AURORA CO 06/26/24 25604		\$106.87
07/02	06/30	55432864183207310846390	GAYLORD ROCKIES RESORT AURORA CO 06/26/24 28286		\$106.87
07/02	06/30	55432864183207310846408	GAYLORD ROCKIES RESORT AURORA CO 06/26/24 28290		\$106.87
07/05	07/04	55429504186715783986059	ENVATO 61383766284 UT		\$78.97
07/12	07/08	85414904193701250681248	HYATT REGENCY LOUISVIL LOUISVILLE KY 07/08/24 32285871		\$561.02
07/12	07/08	85414904193701250681248	HYATT REGENCY LOUISVIL LOUISVILLE KY 07/08/24 32285883		\$593.01
07/15	07/11	85414904194701250681742	HYATT REGENCY LOUISVIL LOUISVILLE KY 07/08/24 32285880		\$72.00
07/15	07/09	85414904194701250681742	HYATT REGENCY LOUISVIL LOUISVILLE KY 07/09/24 32286012		\$775.39
07/15	07/09	85414904194701250681742	HYATT REGENCY LOUISVIL LOUISVILLE KY 07/09/24 32286016		\$823.39
07/15	07/08	85414904194701250681742	HYATT REGENCY LOUISVIL LOUISVILLE KY 07/08/24 32285880		\$976.34
07/15	07/08	85414904194701250681742	HYATT REGENCY LOUISVIL LOUISVILLE KY 07/08/24 32285876		\$976.34
07/15	07/08	85414904194701250681742	HYATT REGENCY LOUISVIL LOUISVILLE KY 07/08/24 32286005		\$1,100.24
07/18	07/16	52704874199019925033846	HYATT REGENCY LEXINGTO LEXINGTON KY 07/14/24 31985815		\$281.01
07/22	07/20	55436874202642024624000	HYATT HOTELS SANTA BARBARA CA 07/14/24 9630720082		\$3,721.21
07/29	07/26	55436874209262097419999	EMBASSY SUITES LOUISVILLE KY 07/24/24 549462		\$84.80
07/29	07/26	55436874209262097420419	EMBASSY SUITES LOUISVILLE KY 07/24/24 549464		\$419.60
07/29	07/26	55436874209262097421037	EMBASSY SUITES LOUISVILLE KY 07/24/24 549462		\$419.60

JENNIFER HOOVER XXXX XXXX XXXX		Credit Limit \$25,000	Credits \$0.00	Purchases \$7,186.40	Cash Advances \$0.00	Total Activity \$7,186.40
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Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount
07/08	07/06	51742954189005331066767	IDENTOGO - KY FINGE 877-512-6962 MA		\$53.25
07/12	07/11	51742954194006419212375	IDENTOGO - KY FINGE 877-512-6962 MA		\$53.25
07/15	07/12	51742954195006658181801	IDENTOGO - KY FINGE 877-512-6962 MA		\$53.25
07/29	07/26	51742954209009758164242	IDENTOGO - KY FINGE 877-512-6962 MA		\$53.25
07/30	07/28	55432864211206443381578	MARRIOTT S ANTONIO RVR 866-435-7627 TX 07/24/24 51313		\$996.20
07/30	07/28	55432864211206443381586	MARRIOTT S ANTONIO RVR 866-435-7627 TX 07/24/24 51314		\$996.20
07/30	07/28	55432864211206443381594	MARRIOTT S ANTONIO RVR 866-435-7627 TX 07/24/24 51315		\$996.20
07/30	07/28	55432864211206443381602	MARRIOTT S ANTONIO RVR 866-435-7627 TX 07/24/24 51316		\$996.20
07/30	07/28	55432864211206443381610	MARRIOTT S ANTONIO RVR 866-435-7627 TX 07/24/24 51317		\$996.20
07/30	07/28	55432864211206443381628	MARRIOTT S ANTONIO RVR 866-435-7627 TX 07/24/24 51318		\$996.20
07/30	07/28	55432864211206443381636	MARRIOTT S ANTONIO RVR 866-435-7627 TX 07/24/24 51319		\$996.20

(transactions continued on next page)



**Cardholder Account Activity cont.**

KIM KLOSTERMAN		Credit Limit	Credits	Purchases	Cash Advances	Total Activity
XXXX XXXX XXXX		\$10,000	\$0.00	\$112.06	\$0.00	\$112.06
Post Date	Tran Date	Reference Number	Transaction Description	VCN	Amount	
07/17	07/16	55488724199005273484428	KYCHFSDEPCOMDSDSERV FRANKFORT KY		\$10.00	
07/24	07/23	05436844206500179025734	LA ROSAS NEWPORT NEWPORT KY		\$102.06	

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VENDOR	REASON	PO	Invoice Amt
HOTEL BOOKING FEE	RESERVATION BOOKING FEE-SUPT TRAVEL		\$15.99
EMBASSY SUITES	SUMMER KASA LODGING		\$605.56
NABSE	MEMBERSHIP		\$156.00
NABSE	NABSE REGISTRATION		\$463.92
EMBASSY SUITES	HOTEL PARKING		\$95.40
KROGER #423	ADMIN RETREAT ITEMS		\$106.90
GFS	ADMIN RETREAT/NEW TEACHER/OPENING DAY		\$338.63
MARCELLA'S DOUGHNUTS	ADMIN RETREAT BREAKFAST		\$22.39
GAYLORD ROCKIES AURORA	LODGING CHARGE-FUSION		\$0.01
GAYLORD ROCKIES AURORA	LODGING CHARGE-FUSION		\$0.01
DELTA AIRLINES	NABSE FLIGHT-DARLA PAYNE		\$312.96
DELTA AIRLINES	NABSE FLIGHT-KATINA BROWN		\$437.96
4 IMPRINT	NEW TEACHER ITEMS	40081	\$1,255.73
SIGNIA HILTON ATLANTA	NABSE LODGING - K BROWN	40016	\$307.77
SIGNIA HILTON ATLANTA	NABSE LODGING - D PAYNE	40016	\$307.77
GAYLORD ROCKIES AURORA	LODGING-HOLY TRINITY FUSION 24 CONF		\$106.87
GAYLORD ROCKIES AURORA	LODGING-HOLY TRINITY FUSION 24 CONF		\$106.87
GAYLORD ROCKIES AURORA	LODGING-HOLY TRINITY FUSION 24 CONF		\$106.87
GAYLORD ROCKIES AURORA	LODGING-HOLY TRINITY FUSION 24 CONF		\$106.87
ENVATO ELEMENTS	NHS ONLINE RESOURCE-MR. RIDDER		\$78.97
HYATT REGENCY LEXINGTON	KY CCBD BEHAVIOR INST- M BROWN	31205	\$281.01
HYATT REGENCY LOUISVILLE	LODGING KACTE CONFERENCE-NHS PERKINS	40049	\$561.02
HYATT REGENCY LOUISVILLE	LODGING KACTE CONFERENCE-NHS PERKINS	40049	\$593.01
HYATT REGENCY LOUISVILLE	LODGING KACTE CONFERENCE-NHS PERKINS	40049	\$72.00
HYATT REGENCY LOUISVILLE	LODGING KACTE CONFERENCE-NHS PERKINS	40049	\$775.39
HYATT REGENCY LOUISVILLE	LODGING KACTE CONFERENCE-NHS PERKINS	40049	\$823.39
HYATT REGENCY LOUISVILLE	LODGING KACTE CONFERENCE-NHS PERKINS	40049	\$976.34
HYATT REGENCY LOUISVILLE	LODGING KACTE CONFERENCE-NHS PERKINS	40049	\$976.34
HYATT REGENCY LOUISVILLE	LODGING KACTE CONFERENCE-NHS PERKINS	40049	\$1,100.24
MAR MONTE HOTEL CA	SPED SUMMER INSTITUTE- LISA SWANSON	31068	\$3,721.21
EMBASSY SUITES LOUISVILLE	KASA CONFERENCE LODGING		\$84.80
EMBASSY SUITES LOUISVILLE	KASA CONFERENCE LODGING		\$419.60
EMBASSY SUITES LOUISVILLE	KASA CONFERENCE LODGING		\$419.60
IDENGO	NEW EMPLOYEE FINGERPRINTS		\$53.25
IDENGO	NEW EMPLOYEE FINGERPRINTS		\$53.25
IDENGO	NEW EMPLOYEE FINGERPRINTS		\$53.25
IDENGO	NEW EMPLOYEE FINGERPRINTS		\$53.25
MARRIOTT RIVERCENTER	NHS LODGING INNOVATIVE SUMMIT	31292	\$996.20
MARRIOTT RIVERCENTER	NHS LODGING INNOVATIVE SUMMIT	31292	\$996.20
MARRIOTT RIVERCENTER	NHS LODGING INNOVATIVE SUMMIT	31292	\$996.20
MARRIOTT RIVERCENTER	NHS LODGING INNOVATIVE SUMMIT	31292	\$996.20
MARRIOTT RIVERCENTER	NHS LODGING INNOVATIVE SUMMIT	31292	\$996.20
MARRIOTT RIVERCENTER	NHS LODGING INNOVATIVE SUMMIT	31292	\$996.20
MARRIOTT RIVERCENTER	NHS LODGING INNOVATIVE SUMMIT	31292	\$996.20
MARRIOTT RIVERCENTER	NHS LODGING INNOVATIVE SUMMIT	31292	\$996.20
KENTUCKY.GOV	CAN REPORT FOR HR		\$10.00
LAROSA'S	BOARD MEETING 7/23/24		\$102.06

Embassy Suites Louisville Downtown  
 501 South Fourth Street  
 Louisville, Kentucky, 40202  
 United States

Support: 833-425-0917

Customer Information

Tony Watts	Arrival:	07/24/24
30 W. 8th Street, Newport	Departure:	07/26/24
US	Itinerary Number:	14164106397
	Page No:	1 of 1

Date	Description	Charges	Credits
07/11/24	HOTEL*BOOK ONLINE (Mastercard xxxx-xxxx-xxxx-6648)		\$621.55
07/24/24	Suite, King - 1 Room	\$229.00	
07/25/24	Suite, King - 1 Room	\$228.30	

Subtotal:	\$457.30	
Taxes & Fees:	\$148.26	
Service Fee:	\$15.99 (1)	(2)
<b>Total:</b>	<b>\$621.55</b>	<b>605.56</b>

NOTE: All incidentals and other charges will be separately handled upon check-out

Thank you for making your booking through Reservation Desk. To make additional reservations online, manage your account, or view your statement please visit ReservationDesk.com

\*Charges will show from our hotel partner. If you believe this booking to be the result of fraudulent activity, please contact: 833-425-0917

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PARTNERS

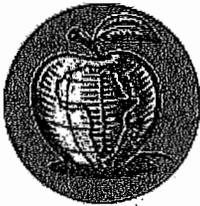
Account: Tony Watts (tony.watts@newport.kyschools.us)

\$156.00

July 24, 2024 to July 24, 2025

**Total \$156.00**

The National Alliance of Black School Educators is in receipt of your membership submission. Memberships, with the exception of Life Memberships, are renewable annually by September 1st.



NABSE is the nation's premier non-profit organization devoted to furthering the academic success for the nation's children - particularly children of African descent.

[READ MORE](#)

**CONTACT INFO**

National Alliance of Black School Educators

Address:  
4005 Wisconsin Ave.  
NW #5704  
Washington, D.C.  
20016-9997

Business hours:  
Mon - Fri: 9AM - 5PM

Phone number:  
833-7NABSE1 /  
(833)762-2731



**RESOURCES**

- Tools for Learning
- Leadership Development
- Technology Corner
- Research Center
- Recommended Reading
- NABSE Perks
- NABSE Partners



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# INVOICE



*Cpd. w/  
Tony's cc*

**Remit payment to:**

NATIONAL ALLIANCE OF BLACK SCHOOL  
EDUCATORS, INC.  
P.O. Box 773247  
Detroit, MI 48277- 3247  
1 (833) 762-2731  
TAX ID: 23-7451661

**Bill to**

Tony Watts  
Newport Board of Education  
30 W. 8th Street  
Newport, KY 41071  
tony.watts@newport.kyschools.us  
859-292-3004

**Invoice no: 32168****Order date: 07-24-2024****Payment method: Debit & Credit Cards**

S.No	Product	Quantity	Unit price	Total price
1	Individual Registration Participant : Tony Watts Email : tony.watts@newport.kyschools.us Mobile Phone : 859-307-7001 Title : Superintendent District/Higer Education Institution : Newport Independent School District Are you a current or past NABSE Board member? : Yes NABSE Present/Past Role : NABSE Member (Non- Officer) Are you a current or past member of a NABSE affillate? : No Is this your First NABSE Conference? : No Do you want a Hard Copy of the Program Booklet? : No How did you hear about the Conference? : NABSE Website	1	\$450.00	\$450.00
Subtotal				\$450.00
Fee				\$13.92 via Fee for Debit/Credit Cards: \$13.92
Total				<b>\$463.92</b>

#4

501 SOUTH FOURTH STREET  
LOUISVILLE, KY 40202  
TELEPHONE 502-813-3800 • FAX 502-813-3801

WATTS, TONY  
1067 GLENHURST CT  
AL WORLD TOW 27TH FLR  
HEBRON KY 41048  
UNITED STATES OF AMERICA

406/NKS  
7/24/2024 6:00:00 PM  
7/26/2024 10:42:00 AM

2/0

Rate Plan:  
HH #  
AL:  
Car:

OPL  
1571563483 BLUE

Confirmation Number: 86205189

7/26/2024

7/24/2024	1760302	VALET PARKING	\$45.00
7/24/2024	1760302	STATE TAX - MISC	\$2.70
7/25/2024	1760907	VALET PARKING	\$45.00
7/25/2024	1760907	STATE TAX - MISC	\$2.70
7/26/2024	1761358	MC *6648	(\$95.40)
		**BALANCE**	\$0.00

EXPENSE REPORT SUMMARY

	7/24/2024	7/25/2024	STAY TOTAL
SHOPS	\$45.00	\$45.00	\$90.00
OTHER	\$2.70	\$2.70	\$5.40
DAILY TOTAL	\$47.70	\$47.70	\$95.40

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549320 A

#5

-95.40

GF EXPENSE ADMIN RETREAT



130 PAVILION PARKWAY  
559 292 640

Your cashier was MICHAEL

KRO ORANGE JCE FC	7.99	F
KRO ORANGE JCE FC	7.99	F
SNWFX MELONS MIXED	10.00	F
SNWFX PINEAPPLE	10.00	F
PRSL CRUMB CAKE	3.35	F
3P CINNAMON ROLLS	2.05	F
12 @ 10/8 OJ		
YOPALI YOGURT	7.20	PC
KROGER SAVINGS	2.40	
BNY NAPKINS	3.99	PC
KROGER SAVINGS	0.30	
1/2 N MATCH	18.00	F
1/2 N MATCH	18.00	F
KRO COFFEE FILTER	3.99	F
3EG WHITE POWDERED	4.49	F
3S EVERYTING CROISS	3.09	F
3S NE STR INT CRO	3.09	F
86 lb @ 0.49 2lb		
BANANAS	2.87	F
KROGER PLUS CUSTOMER	***16061	
TAX	0.48	
TAX EXEMPTION	0.48	
BALANCE	106.90	
NEWPORT KY 41071		
MASTERCARD		
*****16663		
REF#: 064445 TOTAL	106.90	
AID: 800000041010		
TC: 89AB59F4FF00207A		
VERIFIED BY PIN		

MASTERCARD	106.90
EXEMPTED SALES AMT	7.98
CHANGE	0.00
TOTAL NUMBER OF ITEMS SOLD =	26
KRO CPN & KRO SAVINGS	\$ 2.70
TOTAL COUPONS	\$ 2.70
TOTAL SAVINGS (2 @)	\$ 2.70
7/22/24 11:6:39am 423 14 1 423	
Final Savings \$1088.84	
Points Earned Today: 107	
Final Points: 142	

#6

GF EXPENSE ADMIN RETREAT

MARCELLA'S (MT CARMEL)

545 CLOUGH PIKE  
CINCINNATI, OH 45244  
5133720690

7/23

Marcella's doughnuts  
Cashier: Carmen  
23-Jul-2024 6:05:24A

Transaction 007008

1 CLASSIC DOZEN	\$17.99
EXTRAS: PROTEIN CAKE	\$0.50
EXTRAS: CRONUT	\$0.80
EXTRAS: CRONUT	\$0.80
EXTRAS: CRONUT	\$0.80

Total \$22.39

CREDIT CARD AUTH MASTERCARD 6663 \$22.39

Tip \_\_\_\_\_

Total \_\_\_\_\_

Retain this copy for statement validation

Station: Mt Carmel

23-Jul-2024 6:05:35A

\$22.39 | Method: EMV

MASTERCARD XXXXXXXXXXXX6663

LISA RIZZO

Reference ID: 420500602114

Auth ID: 082795

MID: \*\*\*\*\*2888

AID: A0000000041010

AthNtwkNm: MASTERCARD

SIGNATURE

Online: <https://clover.com/p/5CBM7MKV9WC7P>

Clover ID: DGM9QN6J5M2DA  
Payment 5CBM7MKV9WC7P

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#8



Lodging Holy Trinity 2024 Fusion Conference - .01

.01

Title 1

0602118 0580 310J

9+10



GAYLORD HOTELS\*

GAYLORD ROCKIES

GUEST FOLIO

ROOM	CARLEBOSCH/MICHELE	245.00	06/30/24	11:00	28286	27054
	NAME	RATE	DEPART	TIME	ACCT#	GROUP
ROH	HOLY TRINITY SCHOOL		06/26/24			
TYPE	235 DIVISION STREET		ARRIVE	TIME		
365	BELLEVUE KY 41073					
ROOM CLERK	ADDRESS	MCXXXXXXXXXXXX6754			MBV#:	
		PAYMENT				
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE		
04/03	ADVDP-MC PAYMENT RECEIVED BY: MASTERCARD	XXXXXXXXXXXX6754	276.24			
				-276.24		

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2024 Fusion*

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Date of Purchase: Jul 15, 2024

# Cincinnati, OH ▶ Atlanta, GA

## Passenger Information

DARLA PAYNE

Confirmation Number: GM5WAC

Ticket Number: 0062251459054

## FLIGHT

Date and Flight	Status	Class	Seat/Cabin
CVG ▶ ATL   Tue 19Nov2024   DL 2302	OPEN	V	
ATL ▶ CVG   Sun 24Nov2024   DL 3160	OPEN	X	

## DETAILED CHARGES

### Air Transportation Charges

Base Fare: \$263.03 USD

### Taxes, Fees and Charges

United States - September 11th Security Fee(Passenger Civil Aviation \$11.20 USD  
Security Service Fee) (AY)

United States - Transportation Tax (US) \$19.73 USD

United States - Passenger Facility Charge (XF) \$9.00 USD

United States - Flight Segment Tax (ZP) \$10.00 USD

**Total Price:** **\$312.96 USD**

Paid with MasterCard ending 6713 \$312.96 USD

## KEY OF TERMS

- # - Arrival date different than departure date
- \*\* - Check-in required
- \*\*\* - Multiple meals
- \*S\$ - Multiple seats
- AR - Arrives
- B - Breakfast
- C - Bagels / Beverages
- D - Dinner

- F - Food available for purchase
- L - Lunch
- LV - Departs
- M - Movie
- R - Refreshments, complimentary
- S - Snack
- T - Cold meal
- V - Snacks for sale

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Please review Delta's check-in requirements and baggage guidelines for details.

You must be checked in and at the gate at least 15 minutes before your scheduled departure time for travel inside the United States.

You must be checked in and at the gate at least 45 minutes before your scheduled departure time for international travel.

For tips on flying safely with laptops, cell phones, and other battery-powered devices, please visit <http://SafeTravel.dot.gov>

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### NON-REFUNDABLE / CHANGE FEE

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This ticket is non-refundable unless issued as a fully refundable fare. Any change to your itinerary may require payment of a change fee and increased fare. If you do not show up for any flight in your itinerary without notifying Delta or canceling/changing your flight prior to departure, Delta may cancel the reservation for all remaining flights in the itinerary, and the ticket will have no remaining value.

All Preferred, Delta Comfort+™, First Class, Delta Premium Select, and Delta One seat purchases are non-refundable.

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Our right to change terms of the contract.

Check-in requirements and other rules established when we may refuse carriage.

Our rights and limits of our liability for delay of failure to perform service, including schedule change, substitution of alternative air carriers or aircraft, and rerouting.

Our policy on overbooking flights, and your rights if we deny you boarding due to an oversold flight.

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United States - English

[Español](#)

Date of Purchase: Jul 15, 2024

# Lexington, KY ► Atlanta, GA

## Passenger Information

KATINA BROWN

Confirmation Number: GMWLUK

Ticket Number: 0062251956597

## FLIGHT

Date and Flight	Status	Class	Seat/Cabin
LEX ► ATL   Tue 19Nov2024   DL 3058	OPEN	V	
ATL ► LEX   Sun 24Nov2024   DL 2232	OPEN	X	

## DETAILED CHARGES

### Air Transportation Charges

Base Fare:	\$379.31	USD
<b>Taxes, Fees and Charges</b>		
United States - September 11th Security Fee(Passenger Civil Aviation Security Service Fee) (AY)	\$11.20	USD
United States - Transportation Tax (US)	\$28.45	USD
United States - Passenger Facility Charge (XF)	\$9.00	USD
United States - Flight Segment Tax (ZP)	\$10.00	USD
<b>Total Price:</b>	<b>\$437.96</b>	<b>USD</b>
Paid with MasterCard ending 6713	\$437.96	USD

## KEY OF TERMS

# - Arrival date different than departure date	F - Food available for purchase
** - Check-in required	L - Lunch
*** - Multiple meals	LV - Departs
*S\$ - Multiple seats	M - Movie
AR - Arrives	R - Refreshments, complimentary
B - Breakfast	S - Snack
C - Bagels / Beverages	T - Cold meal
D - Dinner	V - Snacks for sale

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 Please review Delta's check-in requirements and baggage guidelines for details.  
 You must be checked in and at the gate at least 15 minutes before your scheduled departure time for travel inside the United States.  
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 Do you have comments about service? Please email us to share them.

### NON-REFUNDABLE / CHANGE FEE

When using certain vouchers to purchase tickets, remaining credits may not be refunded. Additional charges and/or credits may apply and are displayed in the sections below.

This ticket is non-refundable unless issued as a fully refundable fare. Any change to your itinerary may require payment of a change fee and increased fare. If you do not show up for any flight in your itinerary without notifying Delta or canceling/changing your flight prior to departure, Delta may cancel the reservation for all remaining flights in the itinerary, and the ticket will have no remaining value.

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#12

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- Claim restrictions including time periods within which you must file a claim or bring action against us.
- Our right to change terms of the contract.
- Check-in requirements and other rules established when we may refuse carriage.
- Our rights and limits of our liability for delay of failure to perform service, including schedule change, substitution of alternative air carriers or aircraft, and rerouting.
- Our policy on overbooking flights, and your rights if we deny you boarding due to an oversold flight.

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30 W 8TH ST  
NEWPORT, KY 41071-1352

**Invoice Address**  
Newport Ind School Dist  
Newport Board of Education  
30 West 8th Street  
Newport KY 41071-1352  
USA

**Shipping Address**  
Katina Brown  
Newport Board of Education  
30 W 8TH ST  
NEWPORT, KY 41071-1352  
USA  
Tel: (859) 292-3001

**Order Number:** 27669499  
**Order Date:** July 16 2024  
**Account No:** 6010493  
**Reference No:**

**Questions Call:** Olivia Hentz  
**Phone:** 877-446-7746 Ext. 8829  
**Fax:** 800-355-5043  
**Email:** ohentz@4imprint.com

Item	Colma Vacuum Tumbler with Straw - 22 oz. - Colors	Colors	(Tumbler,Straw): Red, Red		
Qty	Item #	Description	Unit \$	Price \$	Total \$
55	154054-C	Colma Vacuum Tumbler with Straw - 22 oz. - Colors	11.5300	634.15	634.15
1	Set-Up Charge	Set-Up Charge	0.0000	0.00	0.00
		Freight		28.98	28.98
					663.13

**Artwork Instructions**

Product Color (Base, Trim): Red,Red  
Imprint Location: Wrap  
Imprint Colors: White

**Additional Notes:**

Art on file: please refer to our previous order (26926229-3) Date: 3/21/2024

Item	Horizon 2.0 True Wireless Ear Buds	Colors	(Case,Ear Buds): White, White		
Qty	Item #	Description	Unit \$	Price \$	Total \$
30	166322	Horizon 2.0 True Wireless Ear Buds	17.5500	526.50	526.50
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
		Freight		11.10	11.10
					592.60

**Artwork Instructions**

Product Color (Base, Trim): White,White  
Imprint Location: Front  
Imprint Colors: Pantone 185C Red

**Grand Total** 1,255.73

#13  
new teacher



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

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Toll Free: 877-446-7746  
Free Fax: 800-355-5043

Order Number: 27669499  
Order Date: July 16 2024  
Account No.: 6010493

Questions Call: Olivia Hentz  
Phone: 877-446-7746 Ext. 8829  
Fax: 800-355-5043  
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**25303 Network Place**  
**Chicago, IL 60673-1253**

**Shipment Details**

Shipment to	Qty	Item #	Estimated Ship Date	Carrier, service	Delivery Date	Freight
Address as above.	55	154054-C	Jul 19 2024	UPS GROUND (Parcel)	Jul 23 2024	28.98
	30	166322	Jul 23 2024	UPS GROUND (Parcel)	Jul 29 2024	11.10



Start Over

# NABSE 2024 ANNUAL CONFERENCE

November 17, 2024 - November 25, 2024

## Extend your stay

### Use calendar to manage your stay dates

Show nightly rate with taxes and fees included  [Taxes and fees](#)

Check-in

Sat Nov 16 USD 307.77	Sun Nov 17 USD 307.77	Mon Nov 18 USD 307.77	<b>Tue Nov 19 USD 307.77</b>	Wed Nov 20 USD 307.77	Thu Nov 21 USD 307.77	Fri Nov 22 USD 307.77
--------------------------------	--------------------------------	--------------------------------	------------------------------------------	--------------------------------	--------------------------------	--------------------------------

Checkout

<b>Sat Nov 23 USD 307.77</b>	Sun Nov 24 -	Mon Nov 25 -	Tue Nov 26 -	Wed Nov 27 -	Thu Nov 28 -	Fri Nov 29 -
------------------------------------------	--------------------	--------------------	--------------------	--------------------	--------------------	--------------------

### Reservation Summary

Check-in	Tue, Nov 19, 2024
Checkout	Sun, Nov 24, 2024
Rooms	1
Guests per room	1
<b>SIGNIA BY HILTON ATLANTA GEORGIA WORLD CONGRESS CENTER</b>	
CITY VIEW TWO QUEEN BED GUESTROOM 1 adult, 5 nights Change rooms	USD 1,295.00
<b>Subtotal</b>	<b>USD 1,295.00</b>
<b>TAXES &amp; FEES</b>	
Fulton county occ tax (3.0% per night)	USD 38.85
State sales tax (4.0% per night)	USD 51.80
Excise Tax (8.0% per night)	USD 103.60
Atlanta Tsplast (0.4% per night)	USD 5.18
Atlanta sales tax (1.5% per night)	USD 19.43
Hotel/Motel Fee per night (USD 5.00 per night)	USD 25.00
<b>Grand Total</b>	<b>USD 1,538.86</b>
<a href="#">Edit reservation</a>	<input type="button" value="Next"/>

*Katrina Mann*

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Start Over

### NABSE 2024 ANNUAL CONFERENCE November 17, 2024 - November 25, 2024

#### Extend your stay

Use calendar to manage your stay dates

Show nightly rate with taxes and fees included  Taxes and fees

Check-in

Sat Nov 16 USD 307.77	Sun Nov 17 USD 307.77	Mon Nov 18 USD 307.77	<b>Tue Nov 19 USD 307.77</b>	Wed Nov 20 USD 307.77	Thu Nov 21 USD 307.77	Fri Nov 22 USD 307.77
--------------------------------	--------------------------------	--------------------------------	------------------------------------------	--------------------------------	--------------------------------	--------------------------------

Checkout

<b>Sat Nov 23 USD 307.77</b>	Sun Nov 24 -	Mon Nov 25 -	Tue Nov 26 -	Wed Nov 27 -	Thu Nov 28 -	Fri Nov 29 -
------------------------------------------	--------------------	--------------------	--------------------	--------------------	--------------------	--------------------

#### Reservation Summary

Check-in: Tue, Nov 19, 2024  
 Checkout: Sun, Nov 24, 2024  
 Rooms: 1  
 Guests per room: 1

**SIGNIA BY HILTON ATLANTA GEORGIA WORLD CONGRESS CENTER**  
 CITY VIEW TWO QUEEN BED GUESTROOM  
 1 adult, 5 nights  
 Change rooms USD 1,295.00

**Subtotal USD 1,295.00**

**TAXES & FEES**  
 Fulton county occ tax (3.0% per night) USD 38.85  
 State sales tax (4.0% per night) USD 51.80  
 Excise Tax (8.0% per night) USD 103.60  
 Atlanta Tsplot (0.4% per night) USD 5.18  
 Atlanta sales tax (1.5% per night) USD 19.43  
 Hotel/Motel Fee per night (USD 5.00 per night) USD 25.00

**Grand Total USD 1,538.86**

Edit reservation

Next

*Darla Payne*

15

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**Hotel: Gaylord Rockies Resort & Convention Center**  
6700 North Gaylord Rockies Boulevard  
Aurora, Colorado 80019  
USA  
(720) 452-6900

**Guest: PLUNKETTSTEELE/MORGAN**  
HOLY TRINITY SCHOOL  
235 DIVISION STREET  
BELLEVUE, KY 41073  
USA

**Dates of stay:** Jun 26, 2024 - Jun 30, 2024

**Guest number:** 28290

**Marriott Bonvoy™ number:** None

**Room number:** 8317

**Group number:** 27054

Date	Description	Reference	Charges	Credits
04/03/24	Payment - MasterCard XXXXXXXXXXXX6754			276.24
05/06/24	Payment - Cash	650782		862.25
06/26/24	GP ROOM	8317, 1	245.00	
06/26/24	ROOM TAX	8317, 1	11.64	
06/26/24	OCC TAX	8317, 1	19.60	
06/26/24	PIF	8317, 1	6.13	
06/26/24	PIFCITY	8317, 1	0.49	
06/26/24	PIFSTATE	8317, 1	0.29	
06/26/24	RESORT	RST FEE	23.00	
06/26/24	RSRTTX	RST FEE	1.84	
06/26/24	RSRTTX	RST FEE	1.09	
06/26/24	CITY FEE	CITY FEE	2.00	
06/26/24	STATETX	CITY FEE	0.10	
06/26/24	CITYTX	CITY FEE	0.16	
06/27/24	GP ROOM	8317, 1	245.00	
06/27/24	ROOM TAX	8317, 1	11.64	
06/27/24	OCC TAX	8317, 1	19.60	
06/27/24	PIF	8317, 1	6.13	
06/27/24	PIFCITY	8317, 1	0.49	

#16

06/27/24	PIFSTATE	8317, 1	0.29
06/27/24	RESORT	RST FEE	23.00
06/27/24	RSRTTX	RST FEE	1.84
06/27/24	RSRTTX	RST FEE	1.09
06/27/24	CITY FEE	CITY FEE	2.00
06/27/24	STATETX	CITY FEE	0.10
06/27/24	CITYTX	CITY FEE	0.16
06/28/24	GP ROOM	8317, 1	245.00
06/28/24	ROOM TAX	8317, 1	11.64
06/28/24	OCC TAX	8317, 1	19.60
06/28/24	PIF	8317, 1	6.13
06/28/24	PIFCITY	8317, 1	0.49
06/28/24	PIFSTATE	8317, 1	0.29
06/28/24	RESORT	RST FEE	23.00
06/28/24	RSRTTX	RST FEE	1.84
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06/28/24	STATETX	CITY FEE	0.10
06/28/24	CITYTX	CITY FEE	0.16
06/29/24	GP ROOM	8317, 1	245.00
06/29/24	ROOM TAX	8317, 1	11.64
06/29/24	OCC TAX	8317, 1	19.60
06/29/24	PIF	8317, 1	6.13
06/29/24	PIFCITY	8317, 1	0.49
06/29/24	PIFSTATE	8317, 1	0.29
06/29/24	RESORT	RST FEE	23.00
06/29/24	RSRTTX	RST FEE	1.84
06/29/24	RSRTTX	RST FEE	1.09
06/29/24	CITY FEE	CITY FEE	2.00
06/29/24	STATETX	CITY FEE	0.10
06/29/24	CITYTX	CITY FEE	0.16
06/30/24	Payment - Cash		0.00
06/30/24	Payment - MasterCard XXXXXXXXXXXX6754		106.87*

*Holy Trinity - Title/  
Fusion 24 Conference*

<b>Total balance</b>	<b>0.00 USD</b>
----------------------	-----------------

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### Summary of Your Stay

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Aurora, Colorado 80019  
USA  
(720) 452-6900

**Guest: CARLEBOSCH/MICHELE**  
HOLY TRINITY SCHOOL  
235 DIVISION STREET  
BELLEVUE, KY 41073  
USA



**Dates of stay:** Jun 26, 2024 - Jun 30, 2024

**Guest number:** 28286

**Marriott Bonvoy™ number:** XXXXX5949

**Room number:** 8313

**Group number:** 27054

Date	Description	Reference	Charges	Credits
04/03/24	Payment - MasterCard XXXXXXXXXXXX6754			276.24
05/06/24	Payment - Cash	650782		862.25
06/26/24	GP ROOM	8313, 1	245.00	
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06/26/24	PIF	8313, 1	6.13	
06/26/24	PIFCITY	8313, 1	0.49	
06/26/24	PIFSTATE	8313, 1	0.29	
06/26/24	RESORT	RST FEE	23.00	
06/26/24	RSRTTX	RST FEE	1.84	
06/26/24	RSRTTX	RST FEE	1.09	
06/26/24	CITY FEE	CITY FEE	2.00	
06/26/24	STATETX	CITY FEE	0.10	
06/26/24	CITYTX	CITY FEE	0.16	
06/27/24	GP ROOM	8313, 1	245.00	
06/27/24	ROOM TAX	8313, 1	11.64	
06/27/24	OCC TAX	8313, 1	19.60	
06/27/24	PIF	8313, 1	6.13	
06/27/24	PIFCITY	8313, 1	0.49	

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06/27/24	PIFSTATE	8313, 1	0.29
06/27/24	RESORT	RST FEE	23.00
06/27/24	RSRTTX	RST FEE	1.84
06/27/24	RSRTTX	RST FEE	1.09
06/27/24	CITY FEE	CITY FEE	2.00
06/27/24	STATETX	CITY FEE	0.10
06/27/24	CITYTX	CITY FEE	0.16
06/28/24	GP ROOM	8313, 1	245.00
06/28/24	ROOM TAX	8313, 1	11.64
06/28/24	OCC TAX	8313, 1	19.60
06/28/24	PIF	8313, 1	6.13
06/28/24	PIFCITY	8313, 1	0.49
06/28/24	PIFSTATE	8313, 1	0.29
06/28/24	RESORT	RST FEE	23.00
06/28/24	RSRTTX	RST FEE	1.84
06/28/24	RSRTTX	RST FEE	1.09
06/28/24	CITY FEE	CITY FEE	2.00
06/28/24	STATETX	CITY FEE	0.10
06/28/24	CITYTX	CITY FEE	0.16
06/29/24	GP ROOM	8313, 1	245.00
06/29/24	ROOM TAX	8313, 1	11.64
06/29/24	OCC TAX	8313, 1	19.60
06/29/24	PIF	8313, 1	6.13
06/29/24	PIFCITY	8313, 1	0.49
06/29/24	PIFSTATE	8313, 1	0.29
06/29/24	RESORT	RST FEE	23.00
06/29/24	RSRTTX	RST FEE	1.84
06/29/24	RSRTTX	RST FEE	1.09
06/29/24	CITY FEE	CITY FEE	2.00
06/29/24	STATETX	CITY FEE	0.10
06/29/24	CITYTX	CITY FEE	0.16
06/30/24	Payment - Cash		0.00
06/30/24	Payment - MasterCard XXXXXXXXXXXX6754		106.87 *

*Holy Trinity - Title I  
Fusion 24 Conference*

**Total balance**

**0.00 USD**

**Important Information**

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(17)

Thank you for choosing the Gaylord Rockies Resort & Convention Center for your recent stay.

As requested, below is a billing summary or adjustment for your stay. **If you have questions about your bill**, please contact us at (866) 435-7627 or [mbs.customer.svc@marriott.com](mailto:mbs.customer.svc@marriott.com).

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**Summary of Your Stay**

**Hotel: Gaylord Rockies Resort & Convention Center**  
 6700 North Gaylord Rockies Boulevard  
 Aurora, Colorado 80019  
 USA  
 (720) 452-6900

**Guest: BOSCH/CATHERINE**  
 HOLY TRINITY SCHOOL  
 235 DIVISION STREET  
 BELLEVUE, KY 41073  
 USA



**Dates of stay:** Jun 26, 2024 - Jun 30, 2024

**Guest number:** 25603

**Marriott Bonvoy™ number:** None

**Room number:** 8311

**Group number:** 27054

Date	Description	Reference	Charges	Credits
04/01/24	Payment - MasterCard XXXXXXXXXXXX6754			276.24
05/06/24	Payment - Cash	650782		862.25
06/26/24	GP ROOM	8311, 1	245.00	
06/26/24	ROOM TAX	8311, 1	11.64	
06/26/24	OCC TAX	8311, 1	19.60	
06/26/24	PIF	8311, 1	6.13	
06/26/24	PIFCITY	8311, 1	0.49	
06/26/24	PIFSTATE	8311, 1	0.29	
06/26/24	RESORT	RST FEE	23.00	
06/26/24	RSRTTX	RST FEE	1.84	
06/26/24	RSRTTX	RST FEE	1.09	
06/26/24	CITY FEE	CITY FEE	2.00	
06/26/24	STATETX	CITY FEE	0.10	
06/26/24	CITYTX	CITY FEE	0.16	
06/27/24	GP ROOM	8311, 1	245.00	
06/27/24	ROOM TAX	8311, 1	11.64	
06/27/24	OCC TAX	8311, 1	19.60	
06/27/24	PIF	8311, 1	6.13	
06/27/24	PIFCITY	8311, 1	0.49	

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06/27/24	PIFSTATE	8311, 1	0.29
06/27/24	RESORT	RST FEE	23.00
06/27/24	RSRTTX	RST FEE	1.84
06/27/24	RSRTTX	RST FEE	1.09
06/27/24	CITY FEE	CITY FEE	2.00
06/27/24	STATETX	CITY FEE	0.10
06/27/24	CITYTX	CITY FEE	0.16
06/28/24	GP ROOM	8311, 1	245.00
06/28/24	ROOM TAX	8311, 1	11.64
06/28/24	OCC TAX	8311, 1	19.60
06/28/24	PIF	8311, 1	6.13
06/28/24	PIFCITY	8311, 1	0.49
06/28/24	PIFSTATE	8311, 1	0.29
06/28/24	RESORT	RST FEE	23.00
06/28/24	RSRTTX	RST FEE	1.84
06/28/24	RSRTTX	RST FEE	1.09
06/28/24	CITY FEE	CITY FEE	2.00
06/28/24	STATETX	CITY FEE	0.10
06/28/24	CITYTX	CITY FEE	0.16
06/29/24	MARKET	8000	0.00
06/29/24	GP ROOM	8311, 1	245.00
06/29/24	ROOM TAX	8311, 1	11.64
06/29/24	OCC TAX	8311, 1	19.60
06/29/24	PIF	8311, 1	6.13
06/29/24	PIFCITY	8311, 1	0.49
06/29/24	PIFSTATE	8311, 1	0.29
06/29/24	RESORT	RST FEE	23.00
06/29/24	RSRTTX	RST FEE	1.84
06/29/24	RSRTTX	RST FEE	1.09
06/29/24	CITY FEE	CITY FEE	2.00
06/29/24	STATETX	CITY FEE	0.10
06/29/24	CITYTX	CITY FEE	0.16
06/30/24	Payment - MasterCard XXXXXXXXXXXX6754		

*Holy Trinity - Title I  
Fusion 24 Conference*

106.87 \*

**Total balance** **0.00 USD**

**Important Information**

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Thank you for choosing the Gaylord Rockies Resort & Convention Center for your recent stay.

As requested, below is a billing summary or adjustment for your stay. **If you have questions about your bill**, please contact us at (866) 435-7627 or [mbs.customer.svc@marriott.com](mailto:mbs.customer.svc@marriott.com).

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**Summary of Your Stay**

**Hotel: Gaylord Rockies Resort & Convention Center**  
 6700 North Gaylord Rockies Boulevard  
 Aurora, Colorado 80019  
 USA  
 (720) 452-6900

**Guest: HUSER/KIM**  
 HOLY TRINITY  
 235 DIVISION STREET  
 BELLEVUE, KY 41073  
 USA



**Dates of stay:** Jun 26, 2024 - Jun 30, 2024  
**Guest number:** 25604  
**Marriott Bonvoy™ number:** None

**Room number:** 8338  
**Group number:** 27054

Date	Description	Reference	Charges	Credits
04/01/24	Payment - MasterCard XXXXXXXXXXXX6754			276.24
05/06/24	Payment - Cash	650782		862.25
06/26/24	GP ROOM	8338, 1	245.00	
06/26/24	ROOM TAX	8338, 1	11.64	
06/26/24	OCC TAX	8338, 1	19.60	
06/26/24	PIF	8338, 1	6.13	
06/26/24	PIFCITY	8338, 1	0.49	
06/26/24	PIFSTATE	8338, 1	0.29	
06/26/24	RESORT	RST FEE	23.00	
06/26/24	RSRTTX	RST FEE	1.84	
06/26/24	RSRTTX	RST FEE	1.09	
06/26/24	CITY FEE	CITY FEE	2.00	
06/26/24	STATETX	CITY FEE	0.10	
06/26/24	CITYTX	CITY FEE	0.16	
06/27/24	GP ROOM	8338, 1	245.00	
06/27/24	ROOM TAX	8338, 1	11.64	
06/27/24	OCC TAX	8338, 1	19.60	
06/27/24	PIF	8338, 1	6.13	
06/27/24	PIFCITY	8338, 1	0.49	

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06/27/24	PIFSTATE	8338, 1	0.29
06/27/24	RESORT	RST FEE	23.00
06/27/24	RSRTTX	RST FEE	1.84
06/27/24	RSRTTX	RST FEE	1.09
06/27/24	CITY FEE	CITY FEE	2.00
06/27/24	STATETX	CITY FEE	0.10
06/27/24	CITYTX	CITY FEE	0.16
06/28/24	GP ROOM	8338, 1	245.00
06/28/24	ROOM TAX	8338, 1	11.64
06/28/24	OCC TAX	8338, 1	19.60
06/28/24	PIF	8338, 1	6.13
06/28/24	PIFCITY	8338, 1	0.49
06/28/24	PIFSTATE	8338, 1	0.29
06/28/24	RESORT	RST FEE	23.00
06/28/24	RSRTTX	RST FEE	1.84
06/28/24	RSRTTX	RST FEE	1.09
06/28/24	CITY FEE	CITY FEE	2.00
06/28/24	STATETX	CITY FEE	0.10
06/28/24	CITYTX	CITY FEE	0.16
06/29/24	GP ROOM	8338, 1	245.00
06/29/24	ROOM TAX	8338, 1	11.64
06/29/24	OCC TAX	8338, 1	19.60
06/29/24	PIF	8338, 1	6.13
06/29/24	PIFCITY	8338, 1	0.49
06/29/24	PIFSTATE	8338, 1	0.29
06/29/24	RESORT	RST FEE	23.00
06/29/24	RSRTTX	RST FEE	1.84
06/29/24	RSRTTX	RST FEE	1.09
06/29/24	CITY FEE	CITY FEE	2.00
06/29/24	STATETX	CITY FEE	0.10
06/29/24	CITYTX	CITY FEE	0.16
06/30/24	Payment - Cash		0.00
06/30/24	Payment - MasterCard XXXXXXXXXXXX6754		106.87 *

*Holy Triinity - Title I  
Fusion 24 Conference*

**Total balance** **0.00 USD**

**Important Information**

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### Envato Elements Pty Ltd

PO Box 16122  
Collins Street West  
Melbourne, Victoria 8007  
Australia  
Email: notices@elements.envato.com  
VAT #: EU372010001  
Registration #: 87 613 824 258

### Invoice

Invoice # 15189433  
Billed On Jul 4, 2024  
Terms On-Receipt  
Due On Jul 4, 2024

Bill To

**Katina Brown**

Newport Independent Schools  
30 W. 8th Street  
Newport, KY 41071  
United States

<b>PAID</b>	on Jul 4, 2024
<b>\$78.97</b> USD	

Date	Description	Qty	Price	Subtotal	Tax	Total
Jul 4 - Aug 4, 2024	Elements Teams \$25	1	\$25.00	\$25.00	6.000%	\$26.50
Jul 4 - Aug 4, 2024	Additional seat	3	\$16.50	\$49.50	6.000%	\$52.47

Subtotal	\$74.50
KY Tax 6%	\$4.47
<b>Total</b>	<b>\$78.97</b>
Paid	(\$78.97)
<b>Amount Due</b>	<b>\$0.00</b>

#### Payments

Jul 4, 2024 \$78.97 Payment from MasterCard ... 6754

#### Notes

*Please treat this invoice as a Tax Invoice. To convert the amounts in your local currency, please use the average monthly exchange rate.*

*Cancel any time at [account.elements.envato.com/subscription](https://account.elements.envato.com/subscription)*

All amounts in United States Dollars (USD)

#20



**Hyatt Regency Louisville**  
 311 South Fourth Street  
 Louisville, KY 40202  
 Tel: 502-581-1234  
 Fax: 502-581-0133

**INFORMATION INVOICE**

Lesley Jo Duzan  
 30 W 8th Street  
 Newport KY 41071  
 United States

Room No. 1015  
 Arrival 07-08-24  
 Departure 07-10-24  
 Follo Window 2  
 Follo No. 933748

Confirmation No. 2803783701  
 Group Name

Date	Description	Charges	Credits
07-08-24	Accommodation	197.00	
07-08-24	City Tax - 8.5%	16.75	
07-08-24	State Occupancy Tax - 1%	1.97	
07-08-24	State Sales Tax - 6%	12.94	
07-08-24	TID Fee	2.96	
07-08-24	State Sales Tax - 6%	0.18	
07-08-24	Self Parking	24.00	
07-09-24	Accommodation	239.00	
07-09-24	City Tax - 8.5%	20.32	
07-09-24	State Occupancy Tax - 1%	2.39	
07-09-24	State Sales Tax - 6%	15.70	
07-09-24	TID Fee	3.59	
07-09-24	State Sales Tax - 6%	0.22	
07-09-24	Self Parking	24.00	
07-10-24	Master Card	XXXXXXXXXXXX6754 XX/XX	561.02

**Total** 561.02 561.02

Guest Signature

**Balance** 0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

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For inquiries concerning your bill, please call 502-581-1234

**World of Hyatt Summary**

Membership: XXXXXX804T  
 Bonus Codes:  
 Qualifying Nights: 2  
 Eligible Spend: 484.00  
 Redemption Eligible: 48.00

Please remit payment to:  
 Hyatt Regency Louisville  
 Attention: Finance/Accounts Receivable  
 311 South Fourth Street  
 Louisville, KY 40202

Summary Invoice, please see front desk for eligible details.

*NHS - Perkins  
 Lodging - KACTE Conference*

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**Hyatt Regency Louisville**  
 311 South Fourth Street  
 Louisville, KY 40202  
 Tel: 502-581-1234  
 Fax: 502-581-0133

**INVOICE**

Ellot Pipes  
 30 W 8th Street  
 Newport KY 41071  
 United States

Room No. 1809  
 Arrival 07-08-24  
 Departure 07-10-24  
 Follo Window 2  
 Follo No. 933769

Confirmation No. 2683043801  
 Group Name

Date	Description	Charges	Credits
07-08-24	Accommodation	236.00	
07-08-24	City Tax - 8.5%	20.06	
07-08-24	State Occupancy Tax - 1%	2.36	
07-08-24	State Sales Tax - 6%	15.51	
07-08-24	TID Fee	3.54	
07-08-24	State Sales Tax - 6%	0.21	
07-09-24	Accommodation	268.00	
07-09-24	City Tax - 8.5%	22.78	
07-09-24	State Occupancy Tax - 1%	2.68	
07-09-24	State Sales Tax - 6%	17.61	
07-09-24	TID Fee	4.02	
07-09-24	State Sales Tax - 6%	0.24	
07-10-24	Master Card	XXXXXXXXXXXX6754 XX/XX	593.01
<b>Total</b>		593.01	593.01

Guest Signature

**Balance**

0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

**WE HOPE YOU ENJOYED YOUR STAY WITH US!**

**World of Hyatt Summary**

Membership: XXXXXX664V  
 Bonus Codes:  
 Qualifying Nights: 2  
 Eligible Spend: 504.00  
 Redemption Eligible: 0.00

Summary Invoice, please see front desk for eligible details.

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For inquiries concerning your bill, please call 502-581-1234

Please remit payment to:  
 Hyatt Regency Louisville  
 Attention: Finance/Accounts Receivable  
 311 South Fourth Street  
 Louisville, KY 40202

*NHS - Perkins  
 Lodging KACTE Conference*

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**Hyatt Regency Louisville**  
 311 South Fourth Street  
 Louisville, KY 40202  
 Tel: 502-581-1234  
 Fax: 502-581-0133

**INFORMATION INVOICE**

Ms Natalie Wolfe  
 30 W 8th Street  
 Newport KY 41071  
 United States

Room No. 1728  
 Arrival 07-08-24  
 Departure 07-11-24  
 Follo Window 2  
 Folio No. 934148

Confirmation No. 4773513401  
 Group Name

Date	Description	Charges	Credits
07-08-24	Accommodation	196.20	
07-08-24	City Tax - 8.5%	16.68	
07-08-24	State Occupancy Tax - 1%	1.96	
07-08-24	State Sales Tax - 6%	12.89	
07-08-24	TID Fee	2.94	
07-08-24	State Sales Tax - 6%	0.18	
07-09-24	Accommodation	254.70	
07-09-24	City Tax - 8.5%	21.65	
07-09-24	State Occupancy Tax - 1%	2.55	
07-09-24	State Sales Tax - 6%	16.73	
07-09-24	TID Fee	3.82	
07-09-24	State Sales Tax - 6%	0.23	
07-10-24	Accommodation	378.90	
07-10-24	City Tax - 8.5%	32.21	
07-10-24	State Occupancy Tax - 1%	3.79	
07-10-24	State Sales Tax - 6%	24.89	
07-10-24	TID Fee	5.68	
07-10-24	State Sales Tax - 6%	0.34	
07-11-24	Master Card XXXXXXXXXXXXX6754 XX/XX		- 976.34 27
07-11-24	Self Parking	24.00	
07-11-24	Self Parking	24.00	
07-11-24	Master Card XXXXXXXXXXXXX6754 XX/XX		- 72.00 23
07-11-24	Self Parking	24.00	

<b>Total</b>	1,048.34	1,048.34
<b>Guest Signature</b>	<b>Balance</b>	0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

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For inquiries concerning your bill, please call 502-581-1234

**World of Hyatt Summary**

No Membership to be credited

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Please remit payment to:  
 Hyatt Regency Louisville  
 Attention: Finance/Accounts Receivable  
 311 South Fourth Street

*NHS - Perkins  
 Lodging - KACTE Conference*



**Hyatt Regency Louisville**  
 311 South Fourth Street  
 Louisville, KY 40202  
 Tel: 502-581-1234  
 Fax: 502-581-0133

**INFORMATION INVOICE**

Bonnie Stacey  
 30 W 8th Street  
 Newport KY 41071  
 United States

Room No. 1402  
 Arrival 07-09-24  
 Departure 07-11-24  
 Follo Window 2  
 Follo No. 934136

Confirmation No. 5592598701  
 Group Name

Date	Description	Charges	Credits
07-09-24	Accommodation	239.00	
07-09-24	City Tax - 8.5%	20.32	
07-09-24	State Occupancy Tax - 1%	2.39	
07-09-24	State Sales Tax - 6%	15.70	
07-09-24	TID Fee	3.59	
07-09-24	State Sales Tax - 6%	0.22	
07-10-24	Accommodation	420.00	
07-10-24	City Tax - 8.5%	35.70	
07-10-24	State Occupancy Tax - 1%	4.20	
07-10-24	State Sales Tax - 6%	27.59	
07-10-24	TID Fee	6.30	
07-10-24	State Sales Tax - 6%	0.38	
07-11-24	Master Card	XXXXXXXXXXXX6754 XX/XX	775.39
<b>Total</b>		<b>775.39</b>	<b>775.39</b>

Guest Signature

**Balance**

0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

**WE HOPE YOU ENJOYED YOUR STAY WITH US!**

**World of Hyatt Summary**

Membership: XXXXXX984W  
 Bonus Codes:  
 Qualifying Nights: 2  
 Eligible Spend: 659.00  
 Redemption Eligible: 0.00

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For inquiries concerning your bill, please call 502-581-1234

Please remit payment to:  
 Hyatt Regency Louisville  
 Attention: Finance/Accounts Receivable  
 311 South Fourth Street  
 Louisville, KY 40202

Summary Invoice, please see front desk for eligible details.

*NHS - Perkins  
 Lodging - KACTE Conference*



**Hyatt Regency Louisville**  
 311 South Fourth Street  
 Louisville, KY 40202  
 Tel: 502-581-1234  
 Fax: 502-581-0133

**INFORMATION INVOICE**

Mr Adam Heldrich  
 30 W 8th Street  
 Newport KY 41071  
 United States

Room No. 1218  
 Arrival 07-09-24  
 Departure 07-11-24  
 Folio Window 2  
 Folio No. 934087

Confirmation No: 1395603801  
 Group Name

Date	Description	Charges	Credits
07-09-24	Accommodation	239.00	
07-09-24	City Tax - 8.5%	20.32	
07-09-24	State Occupancy Tax - 1%	2.39	
07-09-24	State Sales Tax - 6%	15.70	
07-09-24	TID Fee	3.59	
07-09-24	State Sales Tax - 6%	0.22	
07-10-24	Accommodation	420.00	
07-10-24	City Tax - 8.5%	35.70	
07-10-24	State Occupancy Tax - 1%	4.20	
07-10-24	State Sales Tax - 6%	27.59	
07-10-24	TID Fee	6.30	
07-10-24	State Sales Tax - 6%	0.38	
07-11-24	Self Parking	24.00	
07-11-24	Self Parking	24.00	
07-11-24	Master Card	XXXXXXXXXXXX6754 XX/XX	823.39

**Total** 823.39 823.39

Guest Signature

**Balance** 0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

**WE HOPE YOU ENJOYED YOUR STAY WITH US!**

Thank you for choosing the Hyatt Regency Louisville. Our goal is to provide every guest with a perfect stay. We are interested in hearing any comments you may have regarding your visit. You may contact us through one of the following options:

**World of Hyatt Summary**

Membership: XXXXXX732Q  
 Bonus Codes:  
 Qualifying Nights: 2  
 Eligible Spend: 707.00  
 Redemption Eligible: 48.00

For inquiries concerning your bill, please call 502-581-1234

Please remit payment to:  
 Hyatt Regency Louisville  
 Attention: Finance/Accounts Receivable  
 311 South Fourth Street  
 Louisville, KY 40202

Summary Invoice, please see front desk for eligible details.

NHS - Perkins   
 Lodging - KACTE Conference



Hyatt Regency Louisville  
 311 South Fourth Street  
 Louisville, KY 40202  
 Tel: 502-581-1234  
 Fax: 502-581-0133

**INFORMATION INVOICE**

Molly Schultz  
 30 W 8th Street  
 Newport KY 41071  
 United States

Room No. 1522  
 Arrival 07-08-24  
 Departure 07-11-24  
 Folio Window 2  
 Folio No. 934149

Confirmation No. 3589926201  
 Group Name

Date	Description	Charges	Credits
07-08-24	Accommodation	196.20	
07-08-24	City Tax - 8.5%	16.68	
07-08-24	State Occupancy Tax - 1%	1.96	
07-08-24	State Sales Tax - 6%	12.89	
07-08-24	TID Fee	2.94	
07-08-24	State Sales Tax - 6%	0.18	
07-09-24	Accommodation	254.70	
07-09-24	City Tax - 8.5%	21.65	
07-09-24	State Occupancy Tax - 1%	2.55	
07-09-24	State Sales Tax - 6%	16.73	
07-09-24	TID Fee	3.82	
07-09-24	State Sales Tax - 6%	0.23	
07-10-24	Accommodation	378.90	
07-10-24	City Tax - 8.5%	32.21	
07-10-24	State Occupancy Tax - 1%	3.79	
07-10-24	State Sales Tax - 6%	24.89	
07-10-24	TID Fee	5.68	
07-10-24	State Sales Tax - 6%	0.34	
07-11-24	Master Card	XXXXXXXXXXXX6754 XX/XX	976.34

**Total** 976.34 976.34

Guest Signature

**Balance** 0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

**WE HOPE YOU ENJOYED YOUR STAY WITH US!**

Thank you for choosing the Hyatt Regency Louisville. Our goal is to provide every guest with a perfect stay. We are interested in hearing any comments you may have regarding your visit. You may contact us through one of the following options:

For inquiries concerning your bill, please call 502-581-1234

**World of Hyatt Summary**

Membership: XXXXXX867F  
 Bonus Codes:  
 Qualifying Nights: 3  
 Eligible Spend: 829.80  
 Redemption Eligible: 0.00

Please remit payment to:  
 Hyatt Regency Louisville  
 Attention: Finance/Accounts Receivable  
 311 South Fourth Street  
 Louisville, KY 40202

Summary Invoice, please see front desk for eligible details.

*NHS - Perkins*  
*Lodging - KACTE Conference*

26



**Hyatt Regency Louisville**  
 311 South Fourth Street  
 Louisville, KY 40202  
 Tel: 502-581-1234  
 Fax: 502-581-0133

**INFORMATION INVOICE**

Mr John Ridder  
 30 W 8th Street  
 Newport KY 41071  
 United States

Room No. 0512  
 Arrival 07-08-24  
 Departure 07-11-24  
 Folio Window 2  
 Folio No. 934062

Confirmation No. 6124261401  
 Group Name

Date	Description	Charges	Credits
07-08-24	Accommodation	201.60	
07-08-24	City Tax - 8.5%	17.14	
07-08-24	State Occupancy Tax - 1%	2.02	
07-08-24	State Sales Tax - 6%	13.25	
07-08-24	TID Fee	3.02	
07-08-24	State Sales Tax - 6%	0.18	
07-08-24	Self Parking	24.00	
07-09-24	Accommodation	240.30	
07-09-24	City Tax - 8.5%	20.43	
07-09-24	State Occupancy Tax - 1%	2.40	
07-09-24	State Sales Tax - 6%	15.79	
07-09-24	TID Fee	3.60	
07-09-24	State Sales Tax - 6%	0.22	
07-09-24	Self Parking	24.00	
07-10-24	Accommodation	432.00	
07-10-24	City Tax - 8.5%	36.72	
07-10-24	State Occupancy Tax - 1%	4.32	
07-10-24	State Sales Tax - 6%	28.38	
07-10-24	TID Fee	6.48	
07-10-24	State Sales Tax - 6%	0.39	
07-10-24	Self Parking	24.00	
07-11-24	Master Card	XXXXXXXXXXXX6754 XX/XX	1,100.24

**Total** 1,100.24 1,100.24

Guest Signature

**Balance** 0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

**WE HOPE YOU ENJOYED YOUR STAY WITH US!**

Thank you for choosing the Hyatt Regency Louisville. Our goal is to provide every guest with a perfect stay. We are interested in hearing any comments you may have regarding your visit. You may contact us through one of the following options:

**World of Hyatt Summary**

Membership: XXXXXX578C  
 Bonus Codes:  
 Qualifying Nights: 3  
 Eligible Spend: 945.90  
 Redemption Eligible: 72.00

For inquiries concerning your bill, please call 502-581-1234

Please remit payment to:  
 Hyatt Regency Louisville  
 Attention: Finance/Accounts Receivable  
 311 South Fourth Street  
 Louisville, KY 40202

*NHS - Perkins*  
*Lodging - KACTE Conference*



Hyatt Regency Lexington  
 401 West High Street  
 Lexington, KY 40507  
 Tel: 859-253-1234  
 Fax: 859-233-7974  
 lexington.hyatt.com

INVOICE

Morgan Brown  
 30 West 8th Street  
 Newport KY 41071  
 United States

Room No. 1102  
 Arrival 07-14-24  
 Departure 07-16-24  
 Follo Window 1  
 Follo No. 710103

Confirmation No. 426072401  
 Group Name

Date	Description	Charges	Credits
07-14-24	Deposit Transferred at C/I		281.01 *
07-14-24	Accommodation	242.10	
07-14-24	Ky State Sales Tax	15.91	
07-14-24	City Occupancy Tax	20.58	
07-14-24	Ky State Transient Tax	2.42	
07-15-24	Accommodation	242.10	
07-15-24	Ky State Sales Tax	15.91	
07-15-24	City Occupancy Tax	20.58	
07-15-24	Ky State Transient Tax	2.42	
07-16-24	Master Card XXXXXXXXXXXXX6754 XX/XX		281.01
<b>Total</b>		<b>562.02</b>	<b>562.02</b>

Guest Signature

**Balance** 0.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

WE HOPE YOU ENJOYED YOUR STAY WITH US!

**World of Hyatt Summary**

No Membership to be credited  
 Join World of Hyatt today and start earning points for stays, dining and more.  
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Thank you for choosing the Hyatt Regency Lexington. We hope you had an exceptional stay with us. If you have any comments or questions regarding your stay, please contact:

Mail:  
 Guest Affairs att: General Manager  
 401 West High Street, Lexington, KY 40507

For questions regarding your World of Hyatt account, call 800-30-HYATT

Newport Independent Schools  
 Special Education Department

Ky CCBD Behavior Institute  
 IDEA-B

OK TO PAY

*Lisa Swanson*

*HGS*  
 7/17/24

#29



**Mar Monte Hotel**  
 1111 East Cabrillo Boulevard  
 Santa Barbara, CA 93103  
 Tel: 805-882-1234  
 Fax: 805-962-0985  
 santabarbara.hyatt.com

**Newport Independent Schools  
 Special Education Department**

**OK TO PAY**

**INVOICE**

Lisa Swanson  
 30 W 8th St  
 Newport  
 United States

*Lisa Swanson*  
 LGH  
 7/25/24

Room No. 1234  
 Arrival 07-14-24  
 Departure 07-19-24  
 Folio Window 1  
 Folio No. 703550

Confirmation No. 1125772401  
 Group Name  
 Booking No. 4656461188

Date	Description	Charges	Credits
07-14-24	Parking Overnight - Valet	42.00	
07-14-24	Accommodation	585.00	
07-14-24	Occupancy Tax	70.20	
07-14-24	Tourism Marketing Assessment	11.70	
07-14-24	CA Tourism Assessment	0.73	
07-14-24	Resort Fee	30.00	
07-14-24	Miscellaneous Tax	4.20	
07-15-24	Parking Overnight - Valet	42.00	
07-15-24	Accommodation	585.00	
07-15-24	Occupancy Tax	70.20	
07-15-24	Tourism Marketing Assessment	11.70	
07-15-24	CA Tourism Assessment	0.73	
07-15-24	Resort Fee	30.00	
07-15-24	Miscellaneous Tax	4.20	
07-16-24	Parking Overnight - Valet	42.00	
07-16-24	Accommodation	585.00	
07-16-24	Occupancy Tax	70.20	
07-16-24	Tourism Marketing Assessment	11.70	
07-16-24	CA Tourism Assessment	0.73	
07-16-24	Resort Fee	30.00	
07-16-24	Miscellaneous Tax	4.20	
07-17-24	Parking Overnight - Valet	42.00	
07-17-24	Accommodation	585.00	
07-17-24	Occupancy Tax	70.20	
07-17-24	Tourism Marketing Assessment	11.70	
07-17-24	CA Tourism Assessment	0.73	
07-17-24	Resort Fee	30.00	
07-17-24	Miscellaneous Tax	4.20	
07-18-24	Parking Overnight - Valet	42.00	
07-18-24	Accommodation	586.80	
07-18-24	Occupancy Tax	70.42	
07-18-24	Tourism Marketing Assessment	11.74	
07-18-24	CA Tourism Assessment	0.73	
07-18-24	Resort Fee	30.00	
07-18-24	Miscellaneous Tax	4.20	
07-19-24	Master Card		
	XXXXXXXXXXXX6754 XX/XX		3,721.21

#30

Sp. Ed.  
 Summer Institute



**Mar Monte Hotel**  
 1111 East Cabrillo Boulevard  
 Santa Barbara, CA 93103  
 Tel: 805-882-1234  
 Fax: 805-962-0985  
 santabarbara.hyatt.com

INVOICE

Lisa Swanson  
 30 W 8th St  
 Newport  
 United States

Room No. 1234  
 Arrival 07-14-24  
 Departure 07-19-24  
 Follo Window 1  
 Follo No. 703550

Confirmation No. 1125772401  
 Group Name  
 Booking No. 4656461188

<b>Total</b>	3,721.21	3,721.21
<b>Balance</b>	0.00	

Guest Signature

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

**WE HOPE YOU ENJOYED YOUR STAY WITH US!**

**World of Hyatt Summary**

Membership: XXXXXX619F  
 Bonus Codes:  
 Qualifying Nights: 0  
 Eligible Spend: 0.00  
 Redemption Eligible: 21.00

It is our goal to exceed your expectations. We welcome your feedback and comments. Please contact us at [GuestInfo.HyattSantaBarbara@Hyatt.com](mailto:GuestInfo.HyattSantaBarbara@Hyatt.com)

For inquiries concerning your bill please call 805-882-1234 or e-mail [GuestInfo.HyattSantaBarbara@Hyatt.com](mailto:GuestInfo.HyattSantaBarbara@Hyatt.com)

Please remit payment to:  
 Mar Monte Hotel  
 1111 E. Cabrillo Blvd.  
 Santa Barbara, CA 93103

Summary Invoice, please see front desk for eligibility details.

We thank you for choosing the Mar Monte Hotel!

*Sp. Ed.  
 Summer Institute*

601 SOUTH FOURTH STREET  
LOUISVILLE, KY 40202  
TELEPHONE 502-813-3800 • FAX 502-813-3801

BROWN, KATINA

711/NKSP  
7/24/2024 11:52:00 AM  
7/26/2024 11:55:00 AM

1/0  
189.00

Rate Plan:  
HH #  
AL:  
Car:

LVO  
1885437176 BLUE

Confirmation Number: 83532362

7/26/2024

7/24/2024	1760557	GUEST ROOM EXEMPT	\$189.00
7/24/2024	1760557	OCCUPANCY TAX - ROOMS	\$16.07
7/24/2024	1760557	STATE TRANSIENT TAX - ROOMS	\$1.89
7/24/2024	1760557	TID FEE	\$2.84
7/25/2024	1761162	GUEST ROOM EXEMPT	\$189.00
7/25/2024	1761162	OCCUPANCY TAX - ROOMS	\$16.07
7/25/2024	1761162	STATE TRANSIENT TAX - ROOMS	\$1.89
7/25/2024	1761162	TID FEE	\$2.84
7/26/2024	1761407	MC *6754	(\$419.60)
7/26/2024	1761410	MC *6754	(\$84.80)
7/26/2024	1761411	VALET PARKING [XFR FR RM711 BROWN, KATINA:RCPT A] [XFR FR RM BROWN KATINA 711 RCPT A - 7/25/2024]	\$40.00
7/26/2024	1761411	State Tax - Misc [XFR FR RM BROWN KATINA 711 RCPT A - 7/25/2024]	\$2.40
7/26/2024	1761412	VALET PARKING [XFR FR RM711 BROWN, KATINA:RCPT A] [XFR FR RM BROWN KATINA 711 RCPT A - 7/24/2024]	\$40.00
7/26/2024	1761412	State Tax - Misc [XFR FR RM BROWN KATINA 711 RCPT A - 7/24/2024]	\$2.40
		**BALANCE**	\$0.00

\* (31)

KASA Conference

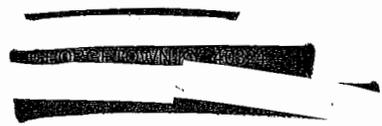
549462 B



EMBASSY SUITES LOUISVILLE  
 501 SOUTH FOURTH STREET  
 LOUISVILLE, KY 40202  
 United States of America  
 TELEPHONE 502-813-3800 • FAX 502-813-3801  
 Reservations  
 www.hilton.com or 1 800 HILTONS

BROWN, KATINA

Room No: 711/NKSP  
 Arrival Date: 7/24/2024 6:14:00 PM  
 Departure Date: 7/26/2024  
 Adult/Child: 1/0  
 Cashier ID: AHAYES58  
 Room Rate: 189.00  
 AL:  
 HH # 1885437176 BLUE  
 VAT #  
 Folio No/Che 549462 B



Confirmation Number: 83532362

EMBASSY SUITES LOUISVILLE 7/26/2024 3:25:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
7/24/2024	1760557	GUEST ROOM EXEMPT	\$189.00
7/24/2024	1760557	OCCUPANCY TAX - ROOMS	\$16.07
7/24/2024	1760557	STATE TRANSIENT TAX - ROOMS	\$1.89
7/24/2024	1760557	TID FEE	\$2.84
7/25/2024	1761162	GUEST ROOM EXEMPT	\$189.00
7/25/2024	1761162	OCCUPANCY TAX - ROOMS	\$16.07
7/25/2024	1761162	STATE TRANSIENT TAX - ROOMS	\$1.89
7/25/2024	1761162	TID FEE	\$2.84
WILL BE SETTLED TO MC*6754			\$419.60 *
EFFECTIVE BALANCE OF			\$0.00

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KASA Conference

32

  
**EMBASSY  
SUITES**  
 by Hilton®

EMBASSY SUITES LOUISVILLE  
 501 SOUTH FOURTH STREET  
 LOUISVILLE, KY 40202  
 United States of America  
 TELEPHONE 502-813-3800 • FAX 502-813-3801  
 Reservations  
 www.hilton.com or 1 800 HILTONS

PAYNE, DARLA

Room No: 558/NKS  
 Arrival Date: 7/24/2024 5:59:00 PM  
 Departure Date: 7/26/2024  
 Adult/Child: 1/0  
 Cashier ID: AHAYES58  
 Room Rate: 189.00  
 AL:  
 HH # 1885437176 BLUE  
 VAT #  
 Folio No/Che 549464 B

Confirmation Number: 86940266

EMBASSY SUITES LOUISVILLE 7/26/2024 3:27:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
7/24/2024	1760483	GUEST ROOM EXEMPT	\$189.00
7/24/2024	1760483	OCCUPANCY TAX - ROOMS	\$16.07
7/24/2024	1760483	STATE TRANSIENT TAX - ROOMS	\$1.89
7/24/2024	1760483	TID FEE	\$2.84
7/25/2024	1761106	GUEST ROOM EXEMPT	\$189.00
7/25/2024	1761106	OCCUPANCY TAX - ROOMS	\$16.07
7/25/2024	1761106	STATE TRANSIENT TAX - ROOMS	\$1.89
7/25/2024	1761106	TID FEE	\$2.84
WILL BE SETTLED TO MC*6754			\$419.60 *
EFFECTIVE BALANCE OF			\$0.00

KASA Conference

33

Kim,  
Can I get the names of the two employees printed in June? The dates were June 6 and June 10. Jessica Perrin and Charnele Brooks (volleyball coaches)

On the statement for July transactions, there are 4 items on the statement and I have three:

- Coach Johnathan Fey
- Shera Sebastian
- Carmella Watts
- Lane Hogan

I just need that 4<sup>th</sup> one missing that occurred on July 6<sup>th</sup>.

Thanks!  
Shannon

*Shannon Meyer*  
Newport Independent Schools  
AP Clerk  
859-292-3014

*\* New employee reprinted  
fingerprints  
#261*

IdentoGO Center (2700020)  
1010 Windsor Dr  
Ste 103/104  
Cold Springs, Kentucky 41076-2026

*Jonathan Fey*  
*Coach*  
**IdentoGO**

Date: 07/11/2024@10:22 AM  
Customer: JONATHAN C. FEY  
UE ID: UZKY5HNX86

**Services**

KY - Education-Newport \$53.25  
Independent-Applicant

SubTotal: \$53.25  
**Total: \$53.25**

**Payment**

Web Coupon: \$53.25  
27G3X1H8J55118FFV

**Amount Paid: \$53.25**

Service status is available at:  
<http://uenroll.identogo.com>  
-- OR --  
844.543.9714

#28  
35

IdentoGO Center (2700020),  
1010 Windsor Dr  
Ste 103/104  
Cold Springs, Kentucky 41076-2026

*Carmella Watts*

# IdentoGO<sup>®</sup>

Date: 07/12/2024@04:46 PM  
Customer: CARMELLA L. WATTS  
UE ID: UZKY5HSBKR

### Services

KY - Education-Newport \$53.25  
Independent-Applicant

SubTotal: \$53.25

**Total: \$53.25**

### Payment

Auth Code: \$53.25  
27G3X1H8J55117V5S

**Amount Paid: \$53.25**

RECEIVED JUL 18 2024

Service status is available at:  
<http://uenroll.identogo.com>  
-- OR --  
844.543.9714

*new employee  
fingerprints*

#36

IdentoGO Center (2700072)  
63 Carothers Rd  
Located inside AAA  
Newport, Kentucky 41071-2415

# IdentoGO<sup>®</sup>

Date: 07/26/2024@02:10 PM  
Customer: SHERA B. SEBASTIAN  
UE ID: UZKY5JB3NV

### Services

KY - Education-Newport \$53.25  
Independent-Applicant

SubTotal: \$53.25

**Total: \$53.25**

### Payment

Web Coupon: \$53.25  
27G3X1H8J5511B9VV

**Amount Paid: \$53.25**

Service status is available at:  
<http://uenroll.identogo.com>  
-- OR --  
844.543.9714

RECEIVED AUG 05 2024

*New employee  
finger printing*

#37



MARRIOTT RIVERCENTER

GUEST FOLIO

3220 ZZ/GRAYSON/TIM 209.00 07/28/24 03:14 51313 32239  
 ROOM NAME RATE DEPART TIME ACCT# GROUP  
 QU 30 W 8TH STREET 07/24/24 11:22  
 TYPE NEWPORT KY 41071 ARRIVE TIME  
 275  
 ROOM PASSPORT:  
 CLERK ADDRESS PAYMENT MCXXXXXXXXXXXX1983 MBV#:

DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE
07/24	ROOM	3220, 1	209.00	
07/24	STATE TX	3220, 1	12.70	
07/24	COUNTYTX	3220, 1	3.70	
07/24	SCR FEE	3220, 1	1.99	
07/24	CITY TAX	3220, 1	19.05	
07/24	TPID FEE	3220, 1	2.61	
07/25	ROOM	3220, 1	209.00	
07/25	STATE TX	3220, 1	12.70	
07/25	COUNTYTX	3220, 1	3.70	
07/25	SCR FEE	3220, 1	1.99	
07/25	CITY TAX	3220, 1	19.05	
07/25	TPID FEE	3220, 1	2.61	
07/26	ROOM	3220, 1	209.00	
07/26	STATE TX	3220, 1	12.70	
07/26	COUNTYTX	3220, 1	3.70	
07/26	SCR FEE	3220, 1	1.99	
07/26	CITY TAX	3220, 1	19.05	
07/26	TPID FEE	3220, 1	2.61	
07/27	ROOM	3220, 1	209.00	
07/27	STATE TX	3220, 1	12.70	
07/27	COUNTYTX	3220, 1	3.70	
07/27	SCR FEE	3220, 1	1.99	
07/27	CITY TAX	3220, 1	19.05	
07/27	TPID FEE	3220, 1	2.61	
07/28	CCARD-MC			
			996.20	
				.00

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 MARRIOTT RIVERCENTER  
 101 BOWIE ST  
 SAN ANTONIO TX 78205  
 2102231000

*NHS*  
*Lodging Innovative Schools Summit*  
*Before & After School Grant*

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This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amounts shown in the credit column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after check-out, you will owe us interest from the check-out date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X



MARRIOTT RIVERCENTER

GUEST FOLIO

3136 ZZ/SCHULTZ/MOLLY 209.00 07/28/24 03:25 51318 32239  
 ROOM NAME RATE DEPART TIME ACCT# GROUP  
 QU 30 W 8TH STREET 07/24/24 11:24  
 TYPE NEWPORT KY 41071 ARRIVE TIME  
 275  
 PASSPORT:  
 ROOM MCXXXXXXXXXXXX1983 MBV#:  
 CLERK ADDRESS PAYMENT

DATE	REFERENCES		CHARGES	CREDITS	BALANCES DUE
07/24	ROOM	3136, 1	209.00		
07/24	STATE TX	3136, 1	12.70		
07/24	COUNTYTX	3136, 1	3.70		
07/24	SCR FEE	3136, 1	1.99		
07/24	CITY TAX	3136, 1	19.05		
07/24	TPID FEE	3136, 1	2.61		
07/25	ROOM	3136, 1	209.00		
07/25	STATE TX	3136, 1	12.70		
07/25	COUNTYTX	3136, 1	3.70		
07/25	SCR FEE	3136, 1	1.99		
07/25	CITY TAX	3136, 1	19.05		
07/25	TPID FEE	3136, 1	2.61		
07/26	ROOM	3136, 1	209.00		
07/26	STATE TX	3136, 1	12.70		
07/26	COUNTYTX	3136, 1	3.70		
07/26	SCR FEE	3136, 1	1.99		
07/26	CITY TAX	3136, 1	19.05		
07/26	TPID FEE	3136, 1	2.61		
07/27	ROOM	3136, 1	209.00		
07/27	STATE TX	3136, 1	12.70		
07/27	COUNTYTX	3136, 1	3.70		
07/27	SCR FEE	3136, 1	1.99		
07/27	CITY TAX	3136, 1	19.05		
07/27	TPID FEE	3136, 1	2.61		
07/28	CCARD-MC			996.20 *	.00

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See <https://members.marriott.com> for more information



MARRIOTT RIVERCENTER  
101 BOWIE ST  
SAN ANTONIO TX 78205  
2102231000

NHS  
Lodging Innovative Schools Summit  
Before & After School Grant

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GUEST FOLIO

3122	ZZ/WOLFE/NATALIE	209.00	07/28/24	03:26	51319	32239
ROOM	NAME	RATE	DEPART	TIME	ACCT#	GROUP
QU	30 W 8TH STREET		07/24/24	11:25		
TYPE	NEWPORT KY 41071		ARRIVE	TIME		
275						
ROOM	ADDRESS	PASSPORT:				MBV#:
CLERK		MCXXXXXXXXXXXX1983				
		PAYMENT				

DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE
07/24	ROOM	3122, 1	209.00	
07/24	STATE TX	3122, 1	12.70	
07/24	COUNTYTX	3122, 1	3.70	
07/24	SCR FEE	3122, 1	1.99	
07/24	CITY TAX	3122, 1	19.05	
07/24	TPID FEE	3122, 1	2.61	
07/25	ROOM	3122, 1	209.00	
07/25	STATE TX	3122, 1	12.70	
07/25	COUNTYTX	3122, 1	3.70	
07/25	SCR FEE	3122, 1	1.99	
07/25	CITY TAX	3122, 1	19.05	
07/25	TPID FEE	3122, 1	2.61	
07/26	ROOM	3122, 1	209.00	
07/26	STATE TX	3122, 1	12.70	
07/26	COUNTYTX	3122, 1	3.70	
07/26	SCR FEE	3122, 1	1.99	
07/26	CITY TAX	3122, 1	19.05	
07/26	TPID FEE	3122, 1	2.61	
07/27	ROOM	3122, 1	209.00	
07/27	STATE TX	3122, 1	12.70	
07/27	COUNTYTX	3122, 1	3.70	
07/27	SCR FEE	3122, 1	1.99	
07/27	CITY TAX	3122, 1	19.05	
07/27	TPID FEE	3122, 1	2.61	
07/28	CCARD-MC			
			996.20	
				.00

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Signature X



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GUEST FOLIO

1034	ZZ/GEARDING/KIA	209.00	07/28/24	03:27	51314	32239
ROOM	NAME	RATE	DEPART	TIME	ACCT#	GROUP
QU	30 W 8TH STREET		07/24/24	11:25		
TYPE	NEWPORT KY 41071		ARRIVE	TIME		
275						
ROOM		PASSPORT:				
CLERK	ADDRESS	MCXXXXXXXXXXXX1983			MBV#:	
		PAYMENT				

DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE
07/24	ROOM	1034, 1	209.00	
07/24	STATE TX	1034, 1	12.70	
07/24	COUNTYTX	1034, 1	3.70	
07/24	SCR FEE	1034, 1	1.99	
07/24	CITY TAX	1034, 1	19.05	
07/24	TPID FEE	1034, 1	2.61	
07/25	ROOM	1034, 1	209.00	
07/25	STATE TX	1034, 1	12.70	
07/25	COUNTYTX	1034, 1	3.70	
07/25	SCR FEE	1034, 1	1.99	
07/25	CITY TAX	1034, 1	19.05	
07/25	TPID FEE	1034, 1	2.61	
07/26	ROOM	1034, 1	209.00	
07/26	STATE TX	1034, 1	12.70	
07/26	COUNTYTX	1034, 1	3.70	
07/26	SCR FEE	1034, 1	1.99	
07/26	CITY TAX	1034, 1	19.05	
07/26	TPID FEE	1034, 1	2.61	
07/27	ROOM	1034, 1	209.00	
07/27	STATE TX	1034, 1	12.70	
07/27	COUNTYTX	1034, 1	3.70	
07/27	SCR FEE	1034, 1	1.99	
07/27	CITY TAX	1034, 1	19.05	
07/27	TPID FEE	1034, 1	2.61	
07/28	CCARD-MC			
			996.20	
				.00

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Signature X



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GUEST FOLIO

910 ROOM ZZ/GILLESPIE/ADAM 209.00 RATE 07/28/24 DEPART 03:12 TIME 51315 ACCT# 32239 GROUP  
 QU TYPE 30 W 8TH STREET NEWPORT KY 41071 07/24/24 ARRIVE 11:23 TIME  
 275  
 ROOM CLERK ADDRESS PASSPORT: MCXXXXXXXXXXXX1983 MBV#:  
 PAYMENT

DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE
07/24	ROOM	910, 1		209.00
07/24	STATE TX	910, 1		12.70
07/24	COUNTYTX	910, 1		3.70
07/24	SCR FEE	910, 1		1.99
07/24	CITY TAX	910, 1		19.05
07/24	TPID FEE	910, 1		2.61
07/25	ROOM	910, 1		209.00
07/25	STATE TX	910, 1		12.70
07/25	COUNTYTX	910, 1		3.70
07/25	SCR FEE	910, 1		1.99
07/25	CITY TAX	910, 1		19.05
07/25	TPID FEE	910, 1		2.61
07/26	ROOM	910, 1		209.00
07/26	STATE TX	910, 1		12.70
07/26	COUNTYTX	910, 1		3.70
07/26	SCR FEE	910, 1		1.99
07/26	CITY TAX	910, 1		19.05
07/26	TPID FEE	910, 1		2.61
07/27	ROOM	910, 1		209.00
07/27	STATE TX	910, 1		12.70
07/27	COUNTYTX	910, 1		3.70
07/27	SCR FEE	910, 1		1.99
07/27	CITY TAX	910, 1		19.05
07/27	TPID FEE	910, 1		2.61
07/28	CCARD-MC			
			996.20 *	.00

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GUEST FOLIO

1920 ZZ/MARSH/TABATHA 209.00 07/28/24 03:23 51316 32239  
 ROOM NAME RATE DEPART TIME ACCT# GROUP  
 QU 30 W 8TH STREET 07/24/24 11:27  
 TYPE NEWPORT KY 41071 ARRIVE TIME  
 275  
 PASSPORT:  
 ROOM MCXXXXXXXXXXXX1983 MBV#:  
 CLERK ADDRESS PAYMENT

DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE
07/24	ROOM	1920, 1	209.00	
07/24	STATE TX	1920, 1	12.70	
07/24	COUNTYTX	1920, 1	3.70	
07/24	SCR FEE	1920, 1	1.99	
07/24	CITY TAX	1920, 1	19.05	
07/24	TPID FEE	1920, 1	2.61	
07/25	ROOM	1920, 1	209.00	
07/25	STATE TX	1920, 1	12.70	
07/25	COUNTYTX	1920, 1	3.70	
07/25	SCR FEE	1920, 1	1.99	
07/25	CITY TAX	1920, 1	19.05	
07/25	TPID FEE	1920, 1	2.61	
07/26	ROOM	1920, 1	209.00	
07/26	STATE TX	1920, 1	12.70	
07/26	COUNTYTX	1920, 1	3.70	
07/26	SCR FEE	1920, 1	1.99	
07/26	CITY TAX	1920, 1	19.05	
07/26	TPID FEE	1920, 1	2.61	
07/27	ROOM	1920, 1	209.00	
07/27	STATE TX	1920, 1	12.70	
07/27	COUNTYTX	1920, 1	3.70	
07/27	SCR FEE	1920, 1	1.99	
07/27	CITY TAX	1920, 1	19.05	
07/27	TPID FEE	1920, 1	2.61	
07/28	CCARD-MC			996.20 * .00

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Signature X



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GUEST FOLIO

949	ZZ/HEIDRICH/ADAM	209.00	07/28/24	03:28	51317	32239
ROOM	NAME	RATE	DEPART	TIME	ACCT#	GROUP
QU	30 W 8TH STREET		07/24/24	11:24		
TYPE	NEWPORT KY 41071		ARRIVE	TIME		
275						
		PASSPORT:				
ROOM		MCXXXXXXXXXXXX1983				MBV#:
CLERK	ADDRESS	PAYMENT				

DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE
07/24	ROOM	949, 1	209.00	
07/24	STATE TX	949, 1	12.70	
07/24	COUNTYTX	949, 1	3.70	
07/24	SCR FEE	949, 1	1.99	
07/24	CITY TAX	949, 1	19.05	
07/24	TPID FEE	949, 1	2.61	
07/25	ROOM	949, 1	209.00	
07/25	STATE TX	949, 1	12.70	
07/25	COUNTYTX	949, 1	3.70	
07/25	SCR FEE	949, 1	1.99	
07/25	CITY TAX	949, 1	19.05	
07/25	TPID FEE	949, 1	2.61	
07/26	ROOM	949, 1	209.00	
07/26	STATE TX	949, 1	12.70	
07/26	COUNTYTX	949, 1	3.70	
07/26	SCR FEE	949, 1	1.99	
07/26	CITY TAX	949, 1	19.05	
07/26	TPID FEE	949, 1	2.61	
07/27	ROOM	949, 1	209.00	
07/27	STATE TX	949, 1	12.70	
07/27	COUNTYTX	949, 1	3.70	
07/27	SCR FEE	949, 1	1.99	
07/27	CITY TAX	949, 1	19.05	
07/27	TPID FEE	949, 1	2.61	
07/28	CCARD-MC			996.20 *
				.00

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MC

**Klosterman, Kim (Newport Supt. Secretary)**

**From:** KentuckySupport <support@kentucky.gov>  
**Sent:** Tuesday, July 16, 2024 10:19 AM  
**To:** Klosterman, Kim (Newport Supt. Secretary)  
**Subject:** Receipt

RECEIVED JUL 18 2024

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[This message originated outside the Newport Independent School District]



Receipt

Jan Plank

Receipt

Your transaction has been submitted! Please print or e-mail a copy of this receipt for your records.

**Note: You MUST click "Complete Payment and Return to CAN" at the bottom of this screen in order for your request to be processed.**

**Confirmation Information**

<b>Transaction Number</b>	113547494
<b>Payment Made</b>	07/16/2024 10:18 AM (-04:00 UTC)
<b>Payment Method</b>	MasterCard Credit Ending With 1822

**Account Holder Details**

<b>Name</b>	Newport Ind School District
<b>Address</b>	30 W. 8th Street Newport, KY 41071

**Cart Item(s)**

Kim K's MC  
45

Description	Amount	Quantity	Extended Total
CAN Application Fee	10.0000	1	\$10.00
		<b>Sub Total</b>	<b>\$10.00</b>
		<b>Total Amount</b>	<b>\$10.00</b>

---

This email was sent to [kim.klosterman@newport.kyschools.us](mailto:kim.klosterman@newport.kyschools.us) on behalf of **Kentucky.gov**

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---

Payment processing by **Kentucky.gov**  
229 West Main Street, Suite 400 Frankfort, KY 40601

45



LaRosa's Newport

Delivery

6:15 PM

*Bob May  
7/23/24*

7/23/2024

4:40 PM

\*\*\*\*\*  
----- TIMED ORDER -----  
\*\*\*\*\*

5 Choc Chunk Cookie (Box Lunch)	\$0.00
5 Kitchen Chips (Box Lunch)	\$0.00
LG Create Your Own *TRD* SG	\$16.29
BLT Box Lunch	\$13.39
2 Chicken Box Lunch	\$26.78
Chicken Club Box Lunch	\$13.39
Royal Box Lunch	\$12.99
5 Sm Tossed Salad w/ID (Box Lunch)	\$0.00

Subtotal:	\$82.84
Delivery Charge:	\$4.25
Gratuity:	\$10.00
Sales Tax:	\$4.97
Payments:	\$102.06

GRAND TOTAL:	\$102.06
BALANCE OWING:	\$0.00

Order# 94  
859 394-3920  
Newport Board of  
Education  
Contact: Kim  
Klosterman  
30 Eighth Street W  
Newport, KY  
Map Coordinate: F3  
Order #94

Payment Type: Credit Card

Special Instructions:

Meeting Place:  
front door

Contact Phone #:  
859 394-3920

**3 TICKETS**

LaRosa's Newport

Card Number:  
Card Type:  
Date/Time:  
Pre-Auth. Amount:

\*\*\*\*\*1822  
MasterCard  
7/23/2024 4:40 PM  
\$102.06

Tip:

\$ \_\_\_\_\_

Total Amount:

\$ \_\_\_\_\_

Auth. #: 024041

Trans. #: 1220839

Server:  
Order #: 94

Susan F.

CUSTOMER COPY

**3 TICKETS**

*Board meeting  
7.23.24  
#46*