

FIFTH THIRD BANK

Account Number: XXXX XXXX XXXX

NEWPORT IND SCHOOL DIST

Statement Closing Date: 11/29/24

Corporate Acco	unt Summary	
Previous Balance		\$3,007.49
Payments		\$3,007.49
Credits		\$0.00
Purchases and Other Charges	••• • •	\$12,473.64
Cash Advances	+	\$0.00
Late Payment Charge	+	\$0.00
Cash Advance Fees	#	\$0.00
Finance Charges	+	\$0.00
New Balance		\$12,473.64
Disputed Amount		\$0.00
Past Due Amount		\$0.00
Credit Limit		\$100,000.00
Available Credit Limit		\$87,526.30
Cash Advance Credit Limit		\$0.00
Available Cash Advance Credit Limit		\$0.00
Statement Closing Date		11/29/24
Days in Billing Cycle		2

Statement For Board

Page 1 of 4 Payment Information New Balance \$12,473.64 Minimum Payment Due \$12,473.64 Payment Due Date 12/24/24 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 inquires to CommercialSupport@53.com

			Corporate Acco	unt Activity			
Post Date	Tran Date	Reference Number	Transaction Descrip				Amount
· 11/25	11/25		AUTO PAYMENT DE	EDUCTION			-\$3,007.49
			Finance Charge	e Summary			
Your Annual I	Percentage Rate	(APR) is the annual rate c	n your account. Annual Percentag	je Rate	Balance Subject t	o Fin	ance
Type of Balan PURCHASES	ce		(APR) 19.80%		Finance Charge \$0.00	Ch \$0.	arge
CASH ADVAN	CES		19.80% 19.80%		\$0.00 \$0.00	φυ. \$0.	

		Cardholder	Account Summa	ıry		
Name and Account Nu	mber Credit Lim	It	Credits	Purchases	Cash Advances	Total Activity
NEWPORT ISD 1						
XXXX XXXX XXXX ?	\$10,00	0	\$0,00	\$259.25	\$0.00	\$259.25
NEWPORT ISD 4						
XXXX XXXX XXXX	\$15,0(0	\$0.00	\$1,332.02	\$0.00	\$1,332.02

(summary continued on next page)

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

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

RECEIVED DEC 1 0 2024

Account NumberXXXX XXXX XXXXPayment Due Date12/24/24Amount Due\$12,473.64Current Balance\$12,473.64

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

**N0013864

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

կայիկաներիականինիրիսերություններին

0321008922000894 0012473641 0012473641

Account Number: XXXX XXXX XXXX Statement Closing Date: 11/29/24

Page 2

201000 - 0003884 - 0001 - 0000 - 2

		Cardho	lder Account Su	immary cont.		
Name and Account Number	Credit Limit		Credits	Purchases	Cash Advances	Total Activity
JENNIFER HOOVEP						
	\$25,000		\$0.00	\$9,553.37	\$0.00	\$9,553.37
KIM KLOSTERMAN						· · · · · · · · · · · · · · · · · · ·
XXXX XXXX XXXX 1	 \$10,000		\$0,00	\$1,329.00	\$0.00	\$1,329.00

Cardholder Account Activity

NEWPORT ISI	D1	Credit Limit	Credits	Purchases	Cash Advances	Total Activity
XXXX XXXX X		\$10.000	\$Ò.ÒO	\$259.25	\$0.00	\$259.25
Post Date	Tran Date	Reference Number	Transaction Description		VCN	Amount
11/01	10/31	55483824306003511773036	WAL-MART #1961 ALEXANDRIA K	(\$259.2
NEWPORT IS	D4	Credit Limit	Credits	Purchases	Cash Advances	Total Activity
XXXXX XXXX X	XXX (\$15,000	\$0.00	\$1,332.02	\$0.00	\$1,332.02
Post Date	Tran Date	Reference Number	Transaction Description		VCN	Amount
11/01	10/30	85369434305594500532016	GALT HOUSE LOUISVILLE KY 10/28/24 000062807			\$7.0
11/01	10/30	85369434305594500532990	GALT HOUSE LOUISVILLE KY 10/28/24 000053441	· ·		\$405.2
11/05 11/14	11/04 11/13	57540244309744345787198 02305374319000640173798	ENVATO 61383766284 UT	NV.		\$78.9 \$14.8
11/20	11/19	82711164324000010102391	USPS PO 2056520671 NEWPORT TRACKWRESTLING.COM AUSTIN	ŤΧ		\$26.0
11/21	11/19	52704874325096617852961	DISNEY RESORTS-WDTC LAKE B 04/07/25 36216277	UENA VI FL		\$200.
11/21	11/19	52704874325096617853092	DISNEY RESORTS-WDTC LAKE B 04/07/25 36216227	UENA VI FL		\$200.0
1.1/21	11/19	52704874325096617853183	DISNEY RESORTS-WDTC LAKE B 04/07/25 36216143	uena vi Fl,		\$200.
11/21	11/19	52704874325096617853266	DISNEY RESORTS-WDTC LAKE B 04/07/25 36216005	UENA VI FL		\$200.
JENNIFER HO		Credit Limit	Credits	Purchases	Cash Advances	Total Activit
XXXX XXXX X		\$25,000	\$0.00	\$9,553.37	\$0.00	\$9,553.3
Post Date	Tran Date	Reference Number	Transaction Description		VCN	Amoun

XXXX XXXX XXXX 1	\$25,000		\$0.00	\$9,553.37	\$0.00	\$9,553,37
Post Date Tran Date	Reference Number	1. 2	Transaction Description		VCN	Amount
11/04 11/02 11/05 11/04 11/12 11/11	55483824308003598608384 51742954309032156206612 55417344317873171493878		SAMSCLUB.COM 888-746-7726 AR IDENTOGO - KY FINGERPR 877-512- DELTA . 006228/289371 DELTA.CC BROWN/KATINA 01/28/25 LEX ATL S	OMICA		\$221.57 \$53.25 \$662.95
11/12 11/11	55417344317873171493696		DELTA 00622821701611 DELTA CO PAYNE/DARLA 01/28/25 CVG ATL SA			\$691.95
11/14 11/13 11/14 11/13 11/14 11/13 11/15 11/14 11/19 11/14 11/22 11/21 11/22 11/21 11/27 11/25	55436874319163197016544 55436874319163197016478 8264431432000002522249 51742954324035312204810 51742954327036021161298 51742954327036021161413 851841243319000114110758 8518412433190001141200		SIGNIA ATLANTA CONV SE ATLANT SIGNIA ATLANTA CONV SE ATLANT PROMO BEARS GRONINGEN NH IDENTOGO - KY FINGERPR 877-512. IDENTOGO - KY FINGERPR 877-512. IDENTOGO - KY FINGERPR 877-512. CITY OF NEWPORT *SERVI DES PL/ CITY OF NEWPORT *SERVI DES PL/	a ga 6962 Ma 6962 Ma 6962 Ma Aines IL		\$1,231.08 \$1,232.08 \$2,132.60 \$53.25 \$53.25 \$53.25 \$53.25 \$53.25 \$107.14 \$3.051.00

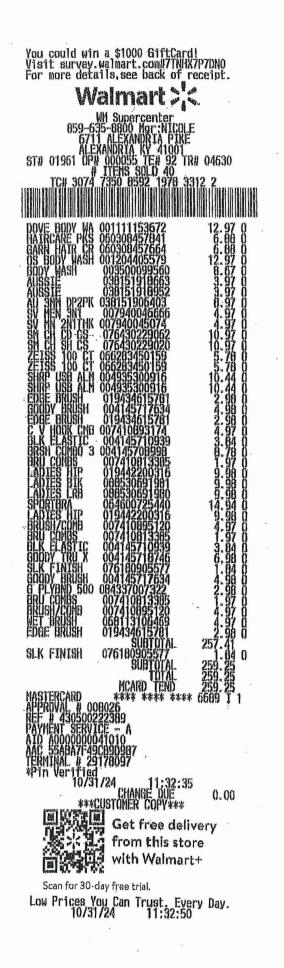
(transactions continued on next page)

Page 3 of 4

Account Number: XXXX XXXX XXXX Statement Closing Date: 11/29/24

	C	ardholder Account Activity cont.		
KIM KLOSTERMAN XXXX XXXX XXXX	Credit Limit	Credifs Purcha \$0.00 \$1.325		Total Activity \$1.329.00
Post Date Tran Date	Reference Number	Transaction Description	VCN	Amount
11/18 11/15 11/18 11/15 11/18 11/15 11/18 11/15 11/19 11/18 11/20 11/19	55546504320152190131266 55546504320152190131274 55546504320152190131282 82305094324000013608247 55546504324156239118487	KENTUCKY SCHOOL BOARDS FRANKFORT K KENTUCKY SCHOOL BOARDS FRANKFORT K KENTUCKY SCHOOL BOARDS FRANKFORT K CONTROL SOLUTIONS ST HELENS OR KENTUCKY SCHOOL BOARDS FRANKFORT K	f	\$315.00 \$315.00 \$315.00 \$69.00 \$315.00

Vendor	Name	Invoice Amt
WAL MART	NHS/YSC WELFARE SPENDING	\$259.25
GALT HOUSE	KY FRYSC CONFERENCE LODGING	\$7.00
GALT HOUSE	KY FRYSC CONFERENCE LODGING	\$405.20
ENVATO	NHS BUSINESS PROGRAM-MR. RIDDER	\$78.97
USPS	DPP MAILING	\$14.85
TRACKWRESTLING	NHS GIRLS WRESTLING WEIGHT TRACKER PROGRAM	\$26.00
DISNEY RESORTS	NHS YSC SPRING SCHOOL FIELD TRIP DEPOSIT	\$200.00
DISNEY RESORTS	NHS YSC SPRING SCHOOL FIELD TRIP DEPOSIT	\$200.00
DISNEY RESORTS	NHS YSC SPRING SCHOOL FIELD TRIP DEPOSIT	\$200.00
DISNEY RESORTS	NHS YSC SPRING SCHOOL FIELD TRIP DEPOSIT	\$200.00
SAM'S CLUB	ATHLETIC CONCESSIONS-NHS	\$221.57
IDENTOGO	NEW EMPLOYEE/COACH FINGERPRINTS	\$53.25
DELTA AIRLINES	NABSE LODGING-D PAYNE	\$662.95
DELTA AIRLINES	NABSE LODGING-K BROWN	\$691.95
SIGNA ATLANTA	NABSE LODGING	\$1,231.08
SIGNA ATLANTA	NABSE LODGING	\$1,232.08
PROMO BEARS	NPS MASCOT	\$2,132.60
IDENTOGO	NEW EMPLOYEE/COACH FINGERPRINTS	\$53.25
IDENTOGO	NEW EMPLOYEE/COACH FINGERPRINTS	\$53.25
IDENTOGO	NEW EMPLOYEE/COACH FINGERPRINTS	\$53.25
CITY OF NEWPORT	STADIUM PH II PRECONSCTRUCTION BUILDING FEE	\$107.14
CITY OF NEWPORT	STADIUM PH II PRECONSCTRUCTION BUILDING FEE	\$3,061.00
KSBA	REGISTRATION-KSBA WINTER SYMPOSIUM	\$315.00
KSBA	REGISTRATION-KSBA WINTER SYMPOSIUM	\$315.00
KSBA	REGISTRATION-KSBA WINTER SYMPOSIUM	\$315.00
CONTROL SOLUTIONS	VACCINE THERMOMETER CALIBRATION	\$69.00
KSBA	REGISTRATION-KSBA WINTER SYMPOSIUM	\$315.00
		\$12,473.64



10/30/24 \$259.25 \$259.25 \$254 \$250 Welfare 1252

NHS/YSC-Welfare Studently Body wash, shampoo, conditional hour brush, etc.

STRE GALT HOUSE. Segondary · HOTEL · Semiunito.

140 N 4th St. Louisville, KY 40202 Tel: (502)589-5200 Fax: (502)585-4266

INFORMATION INVOICE Folio / Invoice # : 721289 1 Arrival : 10-28-24 88509EE376599 : Departure : 10-30-24 Reference # : 1630 **Company Name** : Kentucky Family Resource & Youth S Room No. : 1 of 1 **Donna Watts** Page No. **United States** Membership No. : 171187718B Conf. No. : 1018815 Cashier No. : 411 A/R Number ;

Date	Description	Reference	C	harges	Crédits
	Watts, Donna Room # 163)	n an fair an tha ann an Anna a		
10-28-24	Group Room			169.00	
10-28-24	Local Translent Fee 8.5%			14.37	
10-28-24	State Transient Fee 1%			1.69	
10-28-24	TID Fee 1.5%			2.54	
10 -28-2 4	Parking-Self		1	15.00	
10-29-24	Group Room			169,00	
10-29-24	Local Transient Fee 8.5%			14,37	
10-29-24	State Translent Fee 1%			1.69	
0-29-24	TID Fee 1.5%		•	2.54	
0-29 - 24	Parking-Self		**3	15.00	
0-30-24	Mastercard				405.20
0-30-24	Water - In Room		# 1.	7.00	
10-30-24	Mastercard				7.00
		Guest Total		412.20	412.20
a anna a staine agus an staine agus agus	То	tal		412.20	412.20

Balance

Please contact the Hotel Manager about any Issues with your stay. Wyndham Hotels and Resorts or affiliates may contact you about goods and services unless you call 888-946-4283 or write to Wyndham Worldwide Hotels, Inc. 22 Sylvan Way, Parsippany, NJ 07054 to opt out. View our Wyndham Hotels and Resorts website about privacy.

Lodging FRYSC Lodging Convention Convention #2+

0,00



Envato Elements	Pty Ltd	In	voice			
PO Box 16122 Collins Street West Melbourne, Victoria 8007 Australia Email: notices@elements.envato.com VAT #: EU372010001 Registration #: 87 613 824 258		Bille Ter	bice # ed On ms e On	On Nov 5, 2024 On-Receipt		
Bill To Katina Brown Newport Independent So 30 W. 8th Street Newport, KY 41071 United States	chools		PAID	on Nov 5,		
Date	Description	Qty	Price	Subtotal	Tax	Total
Nov 5 - Dec 5, 2024	Elements Teams \$25	1	\$25.00	\$25.00	6.000%	\$26.50
Nov 5 – Dec 5, 2024	Additional seat	3	\$16.50	\$49.50	6.000%	\$52.47
				Subtotal	 List - Construction and Applications - Space 	\$74.50
				KY Tax 69	6	\$4.47
				Total		\$78.97
				Paid		(\$78.97)
				Amount	Due	\$0.00

Payments

Nov 5, 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

All amounts in United States Dollars (USD)

NANNESS Page 1 of 1



NEWPORT	NEWPORT COLUMBI , KY 410	A ST 071-9998	
11/13/2024			01:32 PM
Product	Qty	Unit Price	Price
USPS Grnd Advtg Hurlock, MD 21 Weight: 6 lb 6 Estimated Deli Sat 11/16/	.80 oz very Dat	e	\$14.85

Tracking #: 9534 6145 1333 4318 7388 Insurance Up to \$100.00 included Total	78 \$0.00 \$14.85
Grand Total: Credit Card Remit	\$14.85 \$14.85 \$14.85
Card Name: MasterCard Account #: XXXXXXXXXXXXXX6754 Approval #: 004257 Transaction #: 562 AID: A0000000041010 AL: MASTERCARD PIN: Not Required	Chip

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

Save this receipt as evidence of insurance. For information on filing an insurance claim go to https://www.usps.com/help/claims.htm or call 1-800-222-1811

Preview your Mail Track your Packages Sign up for FREE @ https://informeddelivery.usps.com

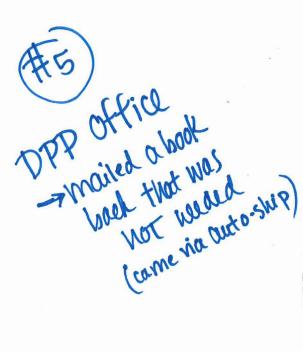
All sales final on stamps and postage. Refunds for guaranteed services only. Thank you for your business.

Tell us about your experience. Go to: https://postalexperience.com/Pos or scan this code with your mobile device,



or call 1-800-410-7420.

UFN: 205652-0671 Receipt #: 840-54500045-3-5971210-1 Clerk: 20



Invoice #: 332529132 Invoice Name: Season Invoice Invoice Date: 11/19/2024 Payment Terms: Net 30 Due Date: 12/19/2024

trackwrestling.com/tickets

\$26.00 paid on 11/19/2024 09:47 a.m. From: FloSports, Inc.

To: Shawn Roberts

Item	Amount	Discount	Total
20240901-25 Weight Management Program (Shawn Roberts (Newport))	\$26.00	0.0%	\$26.00
Total			\$26.00

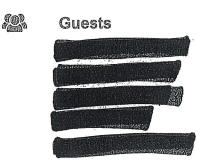
Click the button below to pay the balance online

Pay with Credit Card

You can use the following link to access our W9, which includes our physical address: <u>View W9</u>

NHS GIRLS NHS GIRLS Wrestling Wrestling Walt traduk Walt traduk

5



Package(s): Disney's All-Star Music Resort - Special Offer Disney Resort Hotel Package

Payment Summary

Package Total:

e lotal:

Amount Paid As Of: Tuesday, Nov 19, 2024

Amount Due By: Saturday, Mar 8, 2025



Payment History

Paid Nov 19, 2024: \$200.00 (Credit Card)

To make a payment visit My Reservations with a valid form of payment.

Check and money order payments may be mailed to Walt Disney Travel Co., P.O. Box 733115, Dallas, TX 75373-3115. Please include reservation number on check or money order. Express payment may be made through bank wire transfer or ACH to: JPMorgan Chase Bank, N.A. at 4 New York Plaza, New York, NY 10004 using routing number 021000021 and Operating Account number 700635670 for Account Name "Walt Disney Travel Co." For international payments use Swift Code: CHASUS33. *Bank Fees may apply.*

NHS/VSC Deposit for Student Field Trip



Package(s): Disney's All-Star Music Resort - Special Offer Disney Resort Hotel Package

Payment Summary

Package Total: Amount Paid As Of: Tuesday, Nov 19, 2024 Amount Due By: Saturday, Mar 8, 2025

\$3.021.00 \$200.00 \$2,821.00

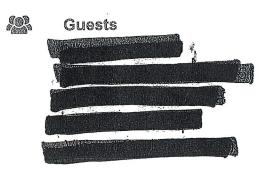
Payment History

Paid Nov 19, 2024: \$200.00 (Credit Card)

To make a payment visit My Reservations with a valid form of payment.

Check and money order payments may be mailed to Walt Disney Travel Co., P.O. Box 733115, Dallas, TX 75373-3115. Please include reservation number on check or money order. Express payment may be made through bank wire transfer or ACH to: JPMorgan Chase Bank, N.A. at 4 New York Plaza, New York, NY 10004 using routing number 021000021 and Operating Account number 700635670 for Account Name "Walt Disney Travel Co." For international payments use Swift Code: CHASUS33. *Bank Fees may apply.*

NHS/VSC Depasit for Student Field Trip



Package(s): Disney's All-Star Music Resort - Special Offer Disney Resort Hotel Package

Payment Summary

Package Total:	\$3,546.40
Amount Paid As Of: Tuesday, Nov 19, 2024	\$200.00
Amount Due By: Saturday, Mar 8, 2025	\$3,346.40

Payment History

Paid Nov 19, 2024: \$200.00 (Credit Card)

To make a payment visit My Reservations with a valid form of payment.

Check and money order payments may be mailed to Walt Disney Travel Co., P.O. Box 733115, Dallas, TX 75373-3115. Please include reservation number on check or money order. Express payment may be made through bank wire transfer or ACH to: JPMorgan Chase Bank, N.A. at 4 New York Plaza, New York, NY 10004 using routing number 021000021 and Operating Account number 700635670 for Account Name "Walt Disney Travel Co." For international payments use Swift Code: CHASUS33. *Bank Fees may apply.*

NHS /YSC Deposit for Student Field Trip

Monday,	Apr	7.	2025
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Backage(s): Disney's All-Star Musi

Package(s): Disney's All-Star Music Resort - Special Offer Disney Resort Hotel Package

Payment Summary

Package Total:

Amount Paid As Of: Tuesday, Nov 19, 2024

Amount Due By: Saturday, Mar 8, 2025



\$1,522.74

Payment History

Paid

Nov 19, 2024: \$200.00 (Credit Card)

To make a payment visit My Reservations with a valid form of payment.

Check and money order payments may be mailed to Walt Disney Travel Co., P.O. Box 733115, Dallas, TX 75373-3115. Please include reservation number on check or money order. Express payment may be made through bank wire transfer or ACH to: JPMorgan Chase Bank, N.A. at 4 New York Plaza, New York, NY 10004 using routing number 021000021 and Operating Account number 700635670 for Account Name "Walt Disney Travel Co." For international payments use Swift Code: CHASUS33. *Bank Fees may apply.*

NHS / YSC Deposit for Student Field Trip

sam's club 🔇

Nov 1, 2024 Order 10228668446		\$221.57 12 items
Pickup items (12)		
lorence Sam's Club 1949 Houston Rd. Iorence, KY 41042 859) 283-5515		
Curbside (12)		
Pate iat, Nov 2 2:00 PM - 01:00 PM		
N&M'S Peanut Milk Chocolate Candy, Singles Size, 1.74 oz., 48 pk. em 2531	Qty 1	\$44.98
labisco Variety Pack Cookies, 30 pk. em 990283550	Qty 4	\$53.92 \$13.48 eact
IERSHEY'S Variety Pack, Milk Chocolate Candy, 30 pk. em 380414	Qty 1	\$27.98
kittles Original Fruity Chewy Candy, Full Size, 2.17 oz., 36 pk. em 15016	Qty 1	\$33.98
Capri Sun Variety Pack 6 fl. oz. pouches, 40 pk. em 847188	Qty 4	\$39.9 2 \$9.98 each
ance Variety Pack Sandwich Crackers, 40 pk. em 678395	Qty 1	\$11.98
Subtotal (12 items)		\$212.76
Pickup fee		Free
Sales tax		\$8.81
Total		\$221.57
MASTERCARD *1983		\$221.57

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.



RE: MONTHLY IDENTOGO

From Klosterman, Kim (Newport Supt. Secretary) <kim.klosterman@newport.kyschools.us> Date Fri 12/13/2024 12:04 PM

To Meyer, Shannon M (Accounts Payable) <shannon.meyer@newport.kyschools.us>

From: Meyer, Shannon M (Accounts Payable) <shannon.meyer@newport.kyschools.us>
Sent: Friday, December 13, 2024 11:33 AM
To: Klosterman, Kim (Newport Supt. Secretary) <kim.klosterman@newport.kyschools.us>
Subject: MONTHLY IDENTOGO

Hi Kim, I have 4 Identogo Charges on this month's Mastercard statement. The dates are:

*12 11/04 – Tessa Lowe-Hoelmer (food service)

11/18 – JR Daniels (coach) 11/21 (2 this day) – Charla and Aaliyah Jones (coaches)

Thanks 🙄

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

At 12 Fingerprints



Date of Purchase: Nov 11, 2024

Lexington, KY 🕨 San Antonio, TX

Passenger Information

KATINA BROWN

Confirmation Number: JNTD8U Ticket Number: 0062282428937

FLIGHT

	And and a second s		
Date and Flight	Status	Class	Seat/Cabin
LEX 🕨 ATL Tue 28Jan2025 DL 3058	OPEN	S	Searcabin
ATL ► SAT Tue 28Jan2025 DL 1408	OPEN	S	
SAT 🕨 ATL Fri 31Jan2025 DL 1408	OPEN	W	
ATL ▶ LEX Fri 31Jan2025 DL 3082	OPÉN	W	
DETAILED CHARGES			
Air Transportation Charges			
Base Fare:			\$570.93 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)			#42.02 USA
United States - Passenger Facility Charge (XF)			\$42.82 USD \$18.00 USD
United States - Flight Segment Tax (ZP)			\$20.00 USD
Total Price:			\$662.95 USD
Paid with MasterCard ending 1983			\$662.95 USD
		pamers	\$302.95 USD
		Flight-	Marzar
KEY OF TERMS		Train	Marzar
# - Arrival date different than departure date		available for purchase	<u> </u>
** - Check-in required	L - Luncl LV - Dep		
***- Multiple meals	M - Mov		
*S\$ - Multiple seats AR - Arrives		shments, complimentary	
B - Breakfast	S - Snacl T - Cold		
C - Bagels / Beverages		meal ks for sale	
D - Dinner			

Check your flight information online at delta.com or call the Delta Flightline at 800.325.1999. Baggage and check-in requirements vary by alrport and airline, so please check with the operating carrier on your ticket. 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 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.

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



Date of Purchase: Nov 11, 2024

Cincinnati, OH 🕨 San Antonio, TX

Passenger Information

A DARLA PAYNE

Confirmation Number: JNK82I Ticket Number: 0062282170161

Flight - Narzand Training NKCES

FLIGHT

Date and Flight	Status	Class	Seat/Cabin
CVG ▶ ATL Tue 28Jan2025 DL 2302	OPEN	S	
ATL ▶ SAT Tue 28Jan2025 DL 1408	OPEN	S	
SAT ▶ ATL Fri 31Jan2025 DL 1408	OPEN	W	
ATL ► CVG Fri 31Jan2025 DL 2248	OPEN	W	
DETAILED CHARGES			
Air Transportation Charges			
Base Fare:			\$597.91 USD
Taxes, Fees and Charges			
United States - September 11th Security Fee(Passenger Civil Aviation Security Service Fee) (AY)			\$11.20 USE
United States - Transportation Tax (US)			\$44.84 USE
United States - Passenger Facility Charge (XF)			\$18.00 USD
United States - Flight Segment Tax (ZP)		to the second	\$20.00 USE
Total Price:			\$691.95 USI
Detd with MasterCard anding 1092			COLOC LICE

Paid with MasterCard ending 1983

KEY OF TERMS

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

Check your flight information online at delta.com or call the Delta Flightline at 800.325.1999. Baggage and check-in requirements vary by airport and airline, so please check with the operating carrier on your ticket. 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

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.



eedback

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

^{by}Hilton

NABSE Lodging

ATLANTA GEORGIA WORLD CONGRESS CENTER

BROWN, KATINA 30 W. 8TH STREET NEWPORT KY 41071 UNITED STATES OF AMERICA Signia by Hilton ATLANTA GEORGIA WORLD CONGRESS CENTER 159 Northside Drive NW, Atlanta, GA 30313 t: (404) 223-8822 f: (404) 223-4003 w: signlabyhiltonatlanta.com

Room: Arrival Date: Departure Date:	2023/Q2RO 11/19/2024 10:01 AM 11/24/2024 4:43 AM
Adult/Child: Room Rate:	1/0 259.00
Rate Plan: HH # AL: Car:	NABSE

Confirmation Number: 3103882604

11/24/2024							Hilton
Date	Description	ID	Ref. No.	Charges	Credits	Balance	WX
7/16/2024	Advance Deposit	SOIG	284517	5		Balarico	WALDORF ASTORIA
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11/14/2024	Advance Deposit	saikapil	504253		(\$1,231.08)		CONRAD
11/19/2024	GUEST ROOM	BCRAIG13	513710	\$259.00			
11/19/2024	RM STATE TAX	BCRAIG13	513710	\$23.05			canopy
11/19/2024	RM OCCUPANCY TAX	BCRAIG13	513710	\$20.72			10
11/19/2024	RM STATE HOTEL MOTEL FEE	BCRAIG13	513710	\$5.00			Signia. Hillton
11/20/2024	GUEST ROOM	BCRAIG13	516515	\$259.00			
11/20/2024	RM STATE TAX	BCRAIG13	516515	\$23.05			
11/20/2024	RM OCCUPANCY TAX	BCRAIG13	516515	\$20,72			Hilton
11/20/2024	RM STATE HOTEL	BCRAIG13	516515	\$5.00			
	MOTEL FEE						CURIO
11/21/2024	GUEST ROOM	BCRAIG13	518539	\$259.00			COLLECTION
11/21/2024	RM STATE TAX	BCRAIG13	518539	\$23.05			(1)
11/21/2024	RM OCCUPANCY TAX	BCRAIG13	518539	\$20.72			DOUBLETREE
11/21/2024	RM STATE HOTEL	BCRAIG13	518539	\$5.00			DOUBLE I REE
	MOTEL FEE						TAPESTRY COLLECTION
11/22/2024	GUEST ROOM	LHERRING2	520413	\$259.00		5	COLLECTION
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11/22/2024	RM STATE HOTEL	LHERRING2	520413	\$5.00		(HI)	EMUASSY SUITES
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				TIPS & MISC.			@ Hilton Grand Vocations
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ATLANTA GEORGIA WORLD CONGRESS CENTER

BROWN, KATINA 30 W. 8TH STREET NEWPORT KY 41071 UNITED STATES OF AMERICA Signia by Hilton ATLANTA GEORGIA WORLD CONGRESS CENTER 159 Northside Drive NW, Atlanta, GA 30313 t: (404) 223-8822 f: (404) 223-4003 w: signiabyhiltonatlanta.com

Room:	2023/Q2RO
Arrival Date:	11/19/2024 10:01 AM
Departure Date:	11/24/2024 4:43 AM
Adult/Child:	1/0
Room Rate:	259.00
Rate Plan: HH # AL: Car:	NABSE

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Confirmation Number: 3103882604

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Signia by Hilton ATLANTĂ GEORGIA WORLD CONGRESS CENTER 159 Northside Drive NW, Atlanta, GA 30313 t: (404) 223-8822 f: (404) 223-4003 w' signiahyhiltonatlanta com

GEORGIA	WORLD	ONGRESS CENTER				W	: signiabyhiltonatlanta	.com	
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11/19	/2024	GUEST ROOM	BCRAIG	513 5138	38	\$259.00	(1.1)		
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ACCOUNT NO. FOLIO NO./CHECK NO. DATE OF CHARGE Jampton, MC *6739 7/16/2024 101597 A tru CARD MEMBER NAME AUTHORIZATION INITIAL PAYNE, DARLA 051024 HOMEWOOD PURCHASES & SERVICES ESTABLISHMENT NO. & LOCATION ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT TAXES HOME TIPS & MISC. - Hilton Grand Vacations CARD MEMBER'S SIGNATURE TOTAL AMOUNT 1.00 Hilton HONORS MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND. PAYMENT DUE UPON RECEIPT

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ATLANTA GEORGIA WORLD CONGRESS CENTER

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Signia by Hilton ATLANTA GEORGIA WORLD CONGRESS CENTER 159 Northside Drive NW, Atlanta, GA 30313 t: (404) 223-8822 f: (404) 223-4003 w: signiabyhiltonatlanta.com

Hilton

HONORS. . .

PAYNE, DARLA 30 W. 8TH STREET NEWPORT KY 41071 UNITED STATES OF AMERICA			Room: Arrival Date: Departure Date: Aduit/Child: Room Rate: Rate Plan: HH #	2424/Q2RC 11/19/2024 10:02 A 11/24/2024 4:30 AM 1/0 259.00 NABSE 2258193800 BLUE		
			AL: Car:			
Confirmation Number: 3098712064						
11/24/2024						Hilton
Date Description	ID	Ref. No.	Charges	Credits	Balance	. WX
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Hilton Honors(R) stays are posted within hotels and resorts in 119 countries, pleas			k your earnings or book	your next stay at mor	ə than 6,500+	(1) Hilton
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CARD MEMBER'S SIGNATURE

· ..

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

TOTAL AMOUNT 1.00 PAYMENT DUE UPON RECEIPT

Receipt

Promo Bears Bringing Mascots to Life

Invoice numberPB2024-1127Receipt number2168-4014Date paidNovember 14, 2024Payment methodMastercard - 1983Project ManagerLouie Sawicki

Promo Bears

Van der Hoopstraat 20 9716 JN Groningen Netherlands +1 941-254-3284 info@promobearsusa.com Bill to Newport Independent Schools 1102 York Street Newport, Kentucky 41071 United States +1 859-292-3011 tracy.kaake@newport.kyschools.us Ship to Newport Independent Schools 1102 York Street Newport, Kentucky 41071 United States +1 859-292-3011

\$2,132.60 paid on November 14, 2024

Thanks for choosing Promo Bears!

Description		Qty	Unit price (excl. tax)	Amount (excl. tax)
Mascot Costume - 50% prepayment		1	\$2,025.00	\$2,025.00
Cooling Vest - 50% payment		1	\$47.50	\$47.50
Processing Fee - 2.9%		1	\$60.10	\$60.10
	Subtotal			\$2,132.60
	Customer is tax e		nerska og kandel gan er forenser for en en gefordelse støde er en forset for for er for	na 2001, 1935, Particle a universitation and an oral particular
	Total			\$2,132.60
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Sales Tax

The Promo Bears headquarters is located in the Netherlands, Europe. For all our clients outside Europe, we do not have to charge any Sales Tax. Our Dutch Tax number is: NL 852.327.808.B01

Payment terms

14 days. The total amount to pay of this invoice should be received by Promo Bears within 14 days after mentioned invoice date.

General Terms

Our General Terms are applicable on all our products and services. You can find them on http://www.promobearsusa.com/termsconditions. If you would like us to sent them through e-mail, please e-mail us: info@promobearsusa.com.

Page 1 of 1

RE: MONTHLY IDENTOGO

From Klosterman, Kim (Newport Supt. Secretary) <kim.klosterman@newport.kyschools.us> Date Fri 12/13/2024 12:04 PM

To Meyer, Shannon M (Accounts Payable) <shannon.meyer@newport.kyschools.us>

From: Meyer, Shannon M (Accounts Payable) <shannon.meyer@newport.kyschools.us>
Sent: Friday, December 13, 2024 11:33 AM
To: Klosterman, Kim (Newport Supt. Secretary) <kim.klosterman@newport.kyschools.us>
Subject: MONTHLY IDENTOGO

Hi Kim, I have 4 Identogo Charges on this month's Mastercard statement. The dates are:

11/04 – Tessa Lowe-Hoelmer (food service)
11/18 – JR Daniels (coach)
11/21 (2 this day) – Charla and Aaliyah Jones (coaches)

Thanks 🙄

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

the 18 photose prints

RE: MONTHLY IDENTOGO

From Klosterman, Kim (Newport Supt. Secretary) <kim.klosterman@newport.kyschools.us> Date Fri 12/13/2024 12:04 PM

To Meyer, Shannon M (Accounts Payable) <shannon.meyer@newport.kyschools.us>

From: Meyer, Shannon M (Accounts Payable) <shannon.meyer@newport.kyschools.us>
Sent: Friday, December 13, 2024 11:33 AM
To: Klosterman, Kim (Newport Supt. Secretary) <kim.klosterman@newport.kyschools.us>
Subject: MONTHLY IDENTOGO

Hi Kim, I have 4 Identogo Charges on this month's Mastercard statement. The dates are:

11/04 – Tessa Lowe-Hoelmer (food service) 11/18 – JR Daniels (coach) 11/21 (2 this day) – Charla and Aaliyah Jones (coaches)

Thanks 🙄

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

#19 + #20 Employee Prints

J. Hoover - Mastercard

11/25/2024

Jennifer Hoover 30 West 8th Street Newport, KY 41071 8592923034 jennifer.hoover@newport.kyschools.us CITY OF NEWPORT 998 MONMOUTH ST NEWPORT, KY 41071 859 292-3660 LKUNTZ@NEWPORTKY.GOV

Thank you for submitting your payment! The details of your transaction are below

Result: Approval - Approved and completed (AVS: Address Match + 5 Zip) chg H - chg Z Service Fee: 107.14 Amount: 3061.00 Total Amount: 3168.14 Auth Code: 052154 Transaction ID: 146964383 Card Present: No paymenttransactionid 1074291 and the states

Stadium PhaseII Pre-construction building fee

RECEIVED NOV 2 5 2024

Attendee Information

Reference Number 86596966

Email Address ramona.malone@newport.kyschools.us

Please use the attendee's email address as this will be needed for the conference app and access to the attendee's schedule. If a copy of the confirmation needs to be sent to another person, additional emails can be added on the following screen under "Additional Emails".

Additional

Confirmation Emails.

Enter any additional

emails that you

would like to receive

the registration kim.klosterman@newport.kyschoools.us

confirmation. If

entering more than

one, please separate

with a semi-colon (;)

and NO spaces.

First Name Ramona

Last Name Malone

Job Title Board Member

Address Line 1 30 W. 8th Straeet

City Newport

US State Kentucky

Zip (Postal Code) 41071

Work Phone 859-292-3004

Attendee Selection Selection

Attendee Category	Board Member Early Bird
12/06/2024	Opening Session - Thriving Under
8:30 am - 9:45 am	Pressure
	Session A Workshops *Please select one A4: Navigating change: Adaptive leadership training for school board members
12/06/2024	Session B Workshops *Please select one
2:15 pm - 3:15 pm	B1: Open meetings/open records training
12/07/2024 9:45 am - 11:00 am	Session E Workshops *Please select one E3: Boards greatest impact: Growing and developing district leadership capacity

Cost \$ 315.00

KSBA WINTER SYMPOSIUM

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	Transaction details	
Date	Transaction Type	Amount
11/15/2024	Transaction Amount	\$ 315.00
11/15/2024	Online Credit Card Payment(xxxxxxxxxxx1822)	\$ -315.00
	Balance	\$ 0.00

Close

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https://na.eventscloud.com/ereg/printrecord.php?id=9fa60395b690b512b3835a289db1f4d6-MjAyNC0xMSM2NzM3NzIwZmMxM2Ey&va_token=390e4... 2/2

Attendee Information

Reference Number 86597107 Email Address ed.davis@newport.kyschools.us Please use the attendee's email address as this will be needed for the conference app and access to the attendee's schedule. If a copy of the confirmation needs to be sent to another person, additional emails can be added on the following screen under "Additional Emails". Additional **Confirmation Emails.** Enter any additional emails that you would like to receive the registration kim.klosterman@newport.kyschools.us confirmation. If entering more than one, please separate with a semi-colon (;) and NO spaces. First Name Ed Last Name Davis Job Title Board Member Address Line 1 30 W. 8th Street **City** Newport **US State** Kentucky Zip (Postal Code) 41071 Work Phone 859-292-3004 Attendee Selection Selection Cost Attendee Category Board Member Early Bird \$ 315.00 12/06/2024 Opening Session - Thriving Under 8:30 am - 9:45 am Pressure Session A Workshops *Please select one 12/06/2024 A4: Navigating change: Adaptive 10:15 am - 11:30 am leadership training for school board members 12/06/2024 Dessert Break Et sive 1:15 pm - 2:15 pm 12/06/2024 Session B Workshops *Please select one 2:15 pm - 3:15 pm B1: Open meetings/open records training

0/24, 11.20 AM	Winter Cymposium 2024		
3:45 pm - 5:00 pm	Session C Workshops *Please select one C3: Considerations for setting tax rates and general obligation bonding (A/S Level III required topic: Finance)		
12/07/2024 9:45 am - 11:00 am	Session E Workshops *Please select one E1: SBM 100 Introduction to school board meetings		
12/07/2024 11:15 am - 12:30 pm	Session F Workshops *Please select one F2: FIN 106 How to get a good night's sleep as a board member		
		Total	\$ 315.00
	Transaction details		

Date	Transaction Type	Amount
11/15/2024	Transaction Amount	\$ 315.00
11/15/2024	Online Credit Card Payment(xxxxxxxxxxx1822)	\$ -315.00
	Balance	\$ 0.00

Close

#24

Attendee Information

Reference Number 86596740

Email Address sylvia.covington@newport.kyschools.us

Please use the attendee's email address as this will be needed for the conference app and access to the attendee's schedule. If a copy of the confirmation needs to be sent to another person, additional emails can be added on the following screen under "Additional Emails".

Additional Confirmation Emails. Enter any additional emails that you would like to receive the registration kim.klosterman@newport.kyschools.us confirmation. If entering more than one, please separate with a semi-colon (;)

and NO spaces.

First Name Sylvia Last Name Covington

Job Title Board Member Address Line 1 30 W. 8th Street City Newport US State Kentucky Zip (Postal Code) 41071 Work Phone 859-292-3004

Attendee Selection Selection

Attendee CategoryBoard Member Early Bird12/06/2024Opening Session - Thriving Under8:30 am - 9:45 amPressure12/06/2024Session A Workshops *Please select one
A3: Spencer County Middle School Career
Development12/06/2024Session B Workshops *Please select one
B1: Open meetings/open records training12/06/2024Session C Workshops *Please select one
D2: SEV 106 Superintendent evaluation:
Setting and meeting goals

Cost \$ 315.00

KSBA Sypposium WINHER Sypposium

12/07/2024Session F Workshops *Please select one11:15 am - 12:30 pmF2: FIN 106 How to get a good night's
sleep as a board member

Total \$315.00

	Transaction details	
Date	Transaction Type	Amount
11/15/2024	Transaction Amount	\$ 315.00
11/15/2024	Online Credit Card Payment(xxxxxxxxxxx1822)	\$ -315.00
	Balance	\$ 0.00

Close

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AP 30 W. 8	rt Independent School District 8th Street rt, KY 41071		Newport Indep Based Health Kim Carius 30 W. 8th Stree Newport, KY	Clinic	hool	
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	Item Receipts: VFC400 Product boxes: Qty:1 Probes: Qty:1 Glycol Bottles: Qty : Acrylic Stands: Qty: Wall mount Bracket: Qty: Charger: Qty Docking Station: Qty Customer contact listed on RM kim.carius@newport.kyschool Customer Notes: Defective product/probes: Control Solutions Notes: RMA V18-41204 10M, (AS), F	s.us				
1	UPS Ground 1Z257E120351988428				15.00	15.00
Thank	you for your business.			Tota	1	\$69.00
		Payments/0	Credits -\$69.00	Bala	ince Due	\$0.00

Vaccine Thermometer Calibration

Attendee Information

Reference Number 86650900

Email Address blstubbeman@live.com

Please use the attendee's email address as this will be needed for the conference app and access to the attendee's schedule. If a copy of the confirmation needs to be sent to another person, additional emails can be added on the following screen under "Additional Emails".

Additional

Confirmation Emails.

Enter any additional

emails that you

would like to receive

the registration kim.klosterman@newport.kyschools.us

confirmation. If

entering more than

one, please separate

with a semi-colon (;)

and NO spaces.

First Name Bobbie

Last Name Stubbeman

Job Title Board Member

Address Line 1 30 W. 8th Street

City Newport

US State Kentucky

Zip (Postal Code) 41071

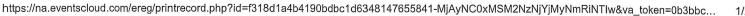
Work Phone 859-292-3004

Attendee Selection Selection

Attendee Category	Board Member Early Bird
12/06/2024 8:30 am - 9:45 am	Opening Session - Thriving Under Pressure
12/06/2024 10:15 am - 11:30 am	Session A Workshops *Please select one A1: BMD 100 - Congratulations! You made the team!
2.15 pm - 3.15 pm	Session B Workshops *Please select one B1: Open meetings/open records training
12/06/2024 3:45 pm - 5:00 pm	Session C Workshops *Please select one C1: BMD 102 - 12 Common mistakes board members make

Cost \$ 315.00

KSBA WINTER WINTER



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19/24, 10:47 AM	Winter Symposium 2024		
12/07/2024 8:00 am - 9:15 am	Session D Workshops *Please select one D1: POL 100 The board's policy making role		
	Session E Workshops *Please select one E1: SBM 100 Introduction to school board meetings		
	Session F Workshops *Please select one F1: BMD 101 Roles and responsibilities of effective boards and board members		
		Total	\$ 315.00
	Transaction details		
Date	Transaction Type	Amou	nt
11/19/2024	Transaction Amount		\$ 315.00
11/19/2024	Online Credit Card Payment(xxxxxxxxxxx1822)		\$ -315.00
	Balance		\$ 0.00

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