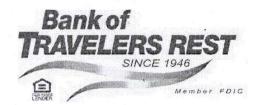


Greenville County Republican Party

Treasurer's Report for the month of January 2023

Deginning Delenge	January	Year to Date
Beginning Balance Income	\$3,946.32	
Donations - Gen Fund		
Fundraiser Revenue	\$276.30	\$276.30
Movie tickets	Ψ270.30	Ψ270.30
T-shirts		
Promo materials		
Jambalaya dinner		
Bank credits	\$10.00	\$10.00
Membership - Anedot	Ψ10100	Ψ10100
Membership -		
Cash/check		
Square		
Membership Funds -		
Total		
Office/Printing		
Total Income	\$286.30	\$286.30
Expenses		
Office/Printing	\$16.94	\$16.94
Fundraiser Expense	\$78.75	\$78.75
Fundraiser - Venue		
Rental		
Fundraiser - Promo		
materials		
Fundraiser - Movie Night		
Fundraiser - Jambalaya		
dinner		
Fundraiser - T-shirts		
Meeting Venue	450.50	φ=0.=0
Insurance	\$50.50	\$50.50
Rent/Utilities	\$1,250.00	\$1,250.00
Fees		
Christmas Party		
Out Reach Efforts Promotional Efforts		
Total Expense	¢1 ጋበር 10	¢1 20 <i>C</i> 10
Iotai Expense	\$1,396.19	\$1,396.19
Ending Balance	\$2,836.43	





Statement Date

Page No.

Jan 31, 2023

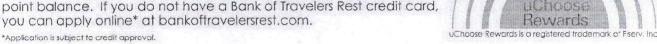
1 of 1

005844

TO PO 156093-8-1-1 - 5844
GREENVILLE COUNTY REPUBLICAN PARTY
2505 WADE HAMPTON BLVD
GREENVILLE SC 29615

important message about your debit rewards points.

Effective December 31, 2022, your Bank of Travelers Rest debit card will no longer accrue uChoose Rewards® points. You can redeem your points for merchandise, gift cards, or travel through March 31, 2023. OR if you have a Bank of Travelers Rest credit card, you may contact us and we can transfer your debit rewards points to your credit card rewards point balance. If you do not have a Bank of Travelers Rest credit card, you can apply online* at bankoftravelersrest.com.



BASIC BUSINESS C	HECKING - XXXXXX57	63		Property of the Control of
Beginning Balance	3 Deposits/Credits	4 Withdrawals/Debits	Days This Period	Ending Balance
\$3,946.32	+ \$286.30	- \$1,396.19	31	\$2,836.43

Date	DEPOSITS / OTHER CREDITS	Amount
01/03/2023	Mobile Deposit	246.30
01/17/2023	Deposit	30.00
01/19/2023	Non-Paper Credit estatement incentive	10.00

CHECKS CLEARED (*) indicates gap in sequence

1114 01/05 1,250.00 1115 01/12 78.75

Date	Date OTHER DEBITS		Ar	nount
01/05/2023	Debit Card Debit		100	50.50
	HARTFORD INS. PR 800-962-6170 CT #0130		W. T.	
01/06/2023	Debit Card PIN Debit		1 mg 1	16.94
	WM SUPERCENTER # TRAVELERS RES SC #0130			

	Total For This Period	Total Year-to-Date	
Total Overdraft Fees	\$.00	\$.00	
Total Returned Item Fees	\$.00	\$.00	

DAII	Y	ENDIN	GB	AL	ANI	CE

01/01	3,946.32	01/05	2,892.12	01/12	2,796.43	01/19	2,836.43
01/03	4,192.62	01/06	2,875.18	01/17	2,826.43		

CHECKBOOK RECONCILIATION

- Compare and mark off enclosed checks, charges and deposits against your checkbook listing.
- List in your checkbook all items which appear on this statement but have not been listed in your checkbook. Example: Automatic Advances, Payments, Cost of Service, and Interest.
- 3. To balance your statement, complete the above and then:

A.	ENTER:	Statement Balance	
В.	ADD:	Amounts deposited since da	ate of statement.
C.	TOTAL:		
D.	SUBTRA	ACT: Outstanding Checks	
E.	BALANC	E:	

OUTSTANDING CHECKS					
DATE	CHECK #	AMOUNT	DATE	CHECK #	AMOUNT
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FOR OUR CONSUMER ACCOUNTS ONLY

ADDITIONAL TRUTH-IN-LENDING DISCLOSURES AS TO YOUR CREDIT ACCOUNT

Imposition of the **FINANCE CHARGE** in your Credit account: To figure and impose the **FINANCE CHARGE**, we will apply the daily periodic rate shown on the face of this Statement to the "average daily balance" of your credit account (including cash transactions). To get the "average daily balance" we will take the beginning balance of your credit account each day, add any new cash advances and subtract any payments or credits. This gives us the daily balance. Then, we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "average daily balance". The average daily balance is or can be multiplied by the number of days in the billing cycle and the daily periodic rate applied to the product to determine the amount of the **FINANCE CHARGE**. **LATE CHARGES**: A late charge will be applied to payments made more than 10 days after the payment due date. The late charge will be equal to 5% of the unpaid amount due and may adjust in accordance with the minimum and maximum charges allowed by the South Carolina Consumer Protection Code as amended.

BILLING RIGHTS SUMMARY (In Case of Errors or Questions About Your Statement)

If you think your Statement is wrong, or if you need more information about a transaction on your Statement, write us on a separate sheet at the address shown on the face of this Statement as soon as possible. We must hear from you no later than 60 days after we sent you the first Statement on which the error or problem appeared. You may telephone us, but doing so will not preserve your rights. In your letter, give us the following information:

- · Your name and account number.
- · The dollar amount of the suspected error.
- . If possible, describe in detail the item you are unsure about and the reason why you believe there is an error.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your Statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

Notice as to Crediting of Payments: If payments are received by us at our primary address, as shown on the face of this Statement, by 6:00 P.M. on a bank business day, they will be credited to your account that same day. If received at this address after 6:00 P.M., they will be credited as of the following bank business day. If you make payments at any other authorized banking location, crediting such payments to your account may be delayed up to 5 days.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

Telephone us at (864) 834-9031 or Toll Free (888) 557-2265 or write us at Bank of Travelers Rest, P.O. Box 1067, Travelers Rest, SC 29690-1067 as soon as you can. If you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appears.

(1) Tell us your name and account number (if any).

(2) Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe there is an error or why you need more information.

(3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promply. If we need more than 10 business days to do this, we will re-credit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation.

PLEASE NOTIFY BANK IN WRITING OF CHANGE OF ADDRESS
TO VERIFY RECEIPT OF ANY DIRECT DEPOSIT OR PRE-AUTHORIZED PAYMENTS
PLEASE CALL (864) 834-9031 OR TOLL FREE (888) 557-2265





Electronic Credit. Ek Travelers Rest 02#E010043 Deposit Number: 92068971 Processing Date: 2023-01-03 Deposit Amount: \$ 246.30 Customer Name: Description: Online User ID: mlwheeler Deposit made to: 30505763 053207371 30505763 265

\$246.30 1/3/2023

ISN:	Date: 01/17/2023 Start Time: 1:23:11 PM
053207371	Amount: 30.00
Branch: 1	Account Number: 30505763
Teller: 6	DDA Credit
	Deposit
Comments:	
RT: 053207371	TC: 151

\$30.00 1/17/2023



1114 \$1,250.00 1/5/2023



1115 \$78.75 1/12/2023