

Statement

Account Name:	ABITOYE, JIBS	Card Number:	xxxx-xxxx-xxxx-1439
Company Name:	CITY OF FORT SASKATCHEWAN	Account Limit:	\$ 5,000.00
Employee ID:	██████████		
Statement Date (MM/DD/YYYY):	06/15/2023	Currency:	CANADIAN DOLLAR

Statement Summary:

Report any items which do not agree with your records within 30 days of the statement date.

Payments:	\$ 0.00
Adjustments:	\$ 0.00
Net Purchases:	\$ 8.00
Cash Advance:	\$ 0.00
Fees:	\$ 0.00
Other Charges:	\$ 0.00
New Account Balance:	\$ 8.00

For your records only. No payment required.

Transaction Summary:

Trans Date	Posting Date Trans ID	Description	Pre-Tax Amount Auth #	Total Tax	Trans Amount
05/15	05/17 473951474	EDM EPARK PAYMACHINE EDMONTON AB	\$ 7.62 045635	\$ 0.38 (e)	\$ 8.00

TOTAL CREDITS	xxxx-xxxx-xxxx-1439	\$ 0.00
TOTAL DEBITS	xxxx-xxxx-xxxx-1439	\$ 8.00

Parkade parking while attending Edmonton Salutes meeting

THIS IS YOUR RECEIPT
CITY OF EDMONTON
THIS IS YOUR RECEIPT

Terminal: 7000te

Plate: [REDACTED]

City Hall - P3 Main Elevator Lobby

Valid through:

MONDAY 15 MAY 23

2:07 PM

Amount Paid: \$8.00 (GST incl.)

Start Time: 5/15/2023 12:08 PM

Tm: 222ef275d1123128

Auth No: 045635

Receipt No: 29429

*****1439

THIS IS YOUR RECEIPT

THIS IS YOUR RECEIPT

THIS IS YOUR RECEIPT

THIS IS YOUR RECEIPT