



Manager: Edna Atkins

Business Purpose: testing

Is this a Credit/Return: No

Vendor Code: fb2778

Card Name: Firsttrust Bank

Card Unit:

Card Receipt Total: \$49.00

Card Purchase Date: Feb-19-2020

Same Expense Code Per Property?: No

Same Description Per Property?: No

Card Purchase for Only One Property: No

Card Allocation Method: Split Evenly

Building	Code Allocation Method	Property Cost	Property Unit#	Expense Code	Code Name	Code Desc	Expense Code Cost
LPM/Corporate Office	Split Evenly	\$49.00		57260	Real Estate Commissions	PSI testing	\$49.00

Please: connect@psdnet.com
Subject: Request for Examination Payment from PSI
To: EDWIN SCHMIDT (INDIVIDUAL)
The: EDWIN.SCHMIDT@INDIVIDUAL

Dear EDWIN ANKINS

Thank you for your payment.

The following are the details of your payment made to PSI for your examination. This email should be used as your payment receipt.

Examination Name: PSI Schizophrenia
Payment Date: 02/19/2023
Payment Type: Credit Card
Confirmation Number: E3485012
Credit Card Number: XXXXXXXXXXXXXXX779

This payment will appear on your credit card statement as "PSI/PSA/MS.COM"

Please be advised that your PSI examination fee is NON-REFUNDABLE AND NON-TRANSFERABLE.

This is NOT confirmation that you have scheduled your exam. You will receive a separate email from PSI with confirmation of your exam date and time. If you have not scheduled an appointment or would like to check/cancel/reschedule your career appointment, visit <https://www.psdnet.com>.
If you have any inquiries, feel free to contact us at support@psdnet.com.