



Manager: Stephen Cicala

Business Purpose: Stephen Cicala- CAM renewal

Is this a Credit/Return: No

Vendor Code: fb7885

Card Name: Firsttrust Bank

Card Unit:

Card Receipt Total: \$100.00

Card Purchase Date: Dec-13-2023

Same Expense Code Per Property?: No

Same Description Per Property?: No

Card Purchase for Only One Property: Yes

Card Allocation Method: Split Evenly

| Building   | Code Allocation Method | Property Cost | Property Unit# | Expense Code | Code Name              | Code Desc                  | Expense Code Cost |
|------------|------------------------|---------------|----------------|--------------|------------------------|----------------------------|-------------------|
| 251 Dekalb | Split Evenly           | \$100.00      |                | 57176        | Dues and Subscriptions | Stephen Cicala-CAM renewal | \$100.00          |

|                                                                                   |                                                                                                     |                                                                                                                                                                                                     |                 |              |                 |              |           |              |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------|-----------------|--------------|-----------|--------------|
|  | 2000 Highway 101, Suite 200<br>Houston, Texas 77058<br>Phone: (713) 462-1100<br>Fax: (713) 462-1101 | <b>RECEIPT</b><br><br>No. _____ Date _____                                                                                                                                                          |                 |              |                 |              |           |              |
|                                                                                   | <b>AMERICAN NATIONAL ASSOCIATION</b>                                                                | <table border="1"> <tr> <td>Accepted Amount</td> <td>PAID IN FULL</td> </tr> <tr> <td>Balance Forward</td> <td>PAID IN FULL</td> </tr> <tr> <td>Check No.</td> <td>PAID IN FULL</td> </tr> </table> | Accepted Amount | PAID IN FULL | Balance Forward | PAID IN FULL | Check No. | PAID IN FULL |
|                                                                                   | Accepted Amount                                                                                     | PAID IN FULL                                                                                                                                                                                        |                 |              |                 |              |           |              |
| Balance Forward                                                                   | PAID IN FULL                                                                                        |                                                                                                                                                                                                     |                 |              |                 |              |           |              |
| Check No.                                                                         | PAID IN FULL                                                                                        |                                                                                                                                                                                                     |                 |              |                 |              |           |              |
| Billing Name<br>Billing Address<br>Billing City<br>Billing State<br>Billing Zip   | Billing Name<br>Billing Address<br>Billing City<br>Billing State<br>Billing Zip                     |                                                                                                                                                                                                     |                 |              |                 |              |           |              |

  

|                                                                                 |                                                                                 |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Billing Name<br>Billing Address<br>Billing City<br>Billing State<br>Billing Zip | Billing Name<br>Billing Address<br>Billing City<br>Billing State<br>Billing Zip |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------|

  

| Product Name    | Quantity | Sales Price | Net Value     |
|-----------------|----------|-------------|---------------|
| Program: _____  | _____    | _____       | _____         |
| Customer: _____ | _____    | _____       | _____         |
| Shipping: _____ | _____    | _____       | _____         |
| Order # _____   | _____    | _____       | _____         |
| Total           |          |             | \$100.00      |
| Paid            |          |             | \$100.00      |
| Balance         |          |             | <b>\$0.00</b> |

  

**CLICK & LEASE RECEIPT**

|              |                 |
|--------------|-----------------|
| Payment Date | Invoice Number  |
| 10/1/2023    | 0000117         |
|              | Amount Received |
|              | \$100.00        |

  

|             |              |
|-------------|--------------|
| Pay Method  | Check Number |
| Credit Card |              |

  

|                  |                      |
|------------------|----------------------|
| Card Card Number | Card Expiration Date |
| 1234             | 12/31/2023           |
| Card Card Number | Card Expiration Date |
| 1234             | 12/31/2023           |