

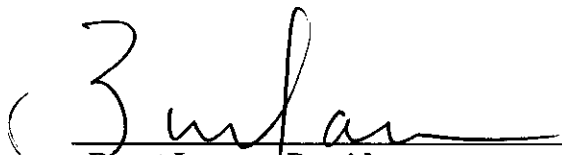
**ORDER: SPREAD ON THE MINUTES MONTHLY CREDIT CARD REPORT**


Motion was made by Scott Allen, duly seconded by Greg Bynum, to spread on the minutes monthly credit card report.

The vote on the motion was as follows:

Supervisor Brent Larson, voted yes  
Supervisor John Morgan, voted yes  
Supervisor Tim Gordon, voted yes  
Supervisor Scott Allen, voted yes  
Supervisor Greg Bynum, voted yes

After the vote, President Larson, declared the motion carried, this the 2<sup>nd</sup> day of February, 2026.

  
**Brent Larson, President**  
**Board of Supervisors**

  
**Mike Roberts, Chancery Clerk**



**Individual Account Summary**

**Visa® Business**

LAFAYETTE CTY SHERIFF DE  
JOSEPH B EAST

Account Number Ending In 7375  
Dec 18 - Jan 17, 2026

Credit Limit	\$16,500	Previous Balance	\$1,377.51
Available Credit	\$16,203	Payments	- \$1,377.51
Billing Date	01/17/26	Credits	- \$0.00
Days in Billing Cycle	31	Purchases/Other	
Payment Due Date	02/12/26	Debits/Other Fees	+ \$296.90
<b>Minimum Payment Due</b>	<b>\$10.00</b>	Cash Advances	+ \$0.00
		<b>Interest Charges</b>	<b>+ \$0.00</b>
		<b>Late Fees</b>	<b>+ \$0.00</b>
		<b>New Balance</b>	<b>\$296.90</b>

To ensure the proper credit, please include the payment coupon from this statement with your check. Failure to include this coupon can result in delayed processing and a late payment fee.

**Interest Charges**

Your **Annual Percentage Rate (APR)** is the annual interest rate on your account.

Type of Balance	Periodic Rate	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
PURCHASES	0.04587% (d)	16.740% (v)	\$0.00	\$0.00

(d) Daily Periodic Rate  
(m) Monthly Periodic Rate  
(v) Variable Rate

**Account Inquiries**

Visit us online at <a href="http://www.regions.com">www.regions.com</a>	Call Customer Service, for Billing Inquiries or to Report a Lost or Stolen Card 1-800-253-2265 TTY 1-800-374-5791	Send Billing Inquiries To : P.O. BOX 216 BIRMINGHAM, AL 35201-0216	Mail Payments To : PO BOX 71075 CHARLOTTE, NC 28272-1075
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DETACH HERE: to ensure the proper credit, please include lower portion with your payment.

1075000220110689076100029690000010003

REGIONS BANK  
P.O. BOX 11007  
BIRMINGHAM AL 35288-0001



Account Number Ending In	7375
Payment Due Date	02/12/26
Minimum Payment Due	\$10.00
New Balance	\$296.90
Amount Enclosed	\$ _____

REGIONS CREDIT CARD COMMERCIAL  
PO BOX 71075  
CHARLOTTE NC 28272-1075

JOSEPH B EAST  
LAFAYETTE CTY SHERIFF DE  
PO BOX 1240  
OXFORD MS 38655-1240

\*\*\*N0002408

Make check or money order payable to:  
**Regions Bank**

500 206 161: 0 2 20 1 10689076 1 20

**Cardholder Activity**

Tran Date	Post Date	Category	Reference Number	Transactions	Amount
12/19	12/22	5411	24445005354400130677525	WM SUPERCENTER #699 OXFORD MS	296.90
01/12	01/13	0000	0020	PAYMENT - THANK YOU	1,377.51 CR

Give us feedback @ survey.walmart.com  
Thank you! ID #: 7VRPVZ7KNLT



Walmart Supercenter  
2530 JACKSON AVE  
OXFORD, MS 38655  
ST# 00699 OP# 009006

ITEMS SOLD  
5495 10508 8291 10810 0616161



BATH SCALE	048035040980	9.98 X
EQ IBUP 1000	681131447810	13.98 X
EQ IBUP 1000	681131447810	13.98 X
EQ IBUP 1000	681131447810	13.98 X
EQ IBUP 1000	681131447810	13.98 X
EQ LDASP 500	194346263650	10.98 X
EQPSYLLM300C	194346206210	10.98 X
ROV HE AAA24	012800540100	14.87 X
EQ FAMOTIDNE	681131395670	11.57 X
EQ FAMOTIDNE	681131395670	11.57 X
EQ FAMOTIDNE	681131395670	11.57 X
PREMIER 5OCT	194346219260	9.00 X
PREMIER 5OCT	194346219260	9.00 X
5OCT NEEDLES	194346270640	6.97 X
5OCT NEEDLES	194346270640	6.97 X
5OCT NEEDLES	194346270640	6.97 X
30G 200CT	681131098850	9.00 X
PREMIER 5OCT	194346219260	9.00 X
PREMIER 5OCT	194346219260	9.00 X
PREMIER 5OCT	194346219260	9.00 X
PREMIER 5OCT	194346219260	9.00 X
PREMIER 5OCT	194346219260	9.00 X
30G 200CT	681131098850	9.00 X
EQ BRY 2X160	681131362160	9.38 X
EQ BRY 2X160	681131362160	9.38 X
EQ BRY 2X160	681131362160	9.38 X
EQPSYLLM160C	194346206220	10.98 X
EQ GASRELIEF	681131109820	7.98 X
EQ GASRELIEF	681131109820	7.98 X
EQ COUGH DRP	681131275270	4.48 X

SUBTOTAL 277.48  
TAX 7.000002% 19.42  
TOTAL 296.90  
VISA TEND 296.90  
CHANGE DUE 0.00

VISA CREDIT 7375  
296.90 TOTAL PURCHASE  
REF # U5321385715  
TRANS ID - 465353653114112  
VALIDATION - 9JV7  
PAYMENT SERVICE  
AID A000000031010  
TERMINAL # 28283142  
No. Signature Required  
12/19/25 12:08:36

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12/19/25 12:08:36  
\*\*\*\*\* RETURN & EXCHANGE POLICY \*\*\*\*\*  
All diabetic testing supplies  
including meters, strips, lancets, syringes, are not returnable.  
All sales are final.  
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