

IN THE SUPREME COURT FOR THE STATE OF NEVADA

Electronically Filed
Jan 10 2022 06:35 a.m.
Elizabeth A. Brown
Clerk of Supreme Court

Jeffrey Reed, Petitioner, vs. Alecia Reed nka Draper and Alicia Draper, as Conservator for Emily Reed, Respondent.	Supreme Court #: 82575 (Appeal) District Court Case #: 05D338668
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VOLUME 10 of 11 - RESPONDENT'S APPENDIX

BRENNAN LAW FIRM

/s/ Elizabeth Brennan

ELIZABETH BRENNAN

Nevada Bar No. 7286

7340 Eastgate Road, Suite 170

Henderson, Nevada 89011

Phone: (702) 419-2133

Attorney for Respondent Emily Reed

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<u>Trial Exhibit K</u> (Admitted 01/12/21) HIPPA Release signed by Emily (Valid thru 11/16/17)	VOL. 11 RESP'T APP 2468 – 2469
<u>Trial Exhibit L</u> (Admitted 01/12/21) HIPPA Release Signed by Emily (Valid 11/16/20)	VOL. 11 RESP'T APP 2470 – 2471

Respectfully Submitted on this 10th day of January, 2022.

BRENNAN LAW FIRM

/s/ Elizabeth Brennan

ELIZABETH BRENNAN

Nevada Bar No. 7286

7340 Eastgate Road, Suite 170

Henderson, Nevada 89011

Phone: (702) 419-2133

Attorney for Respondent Emily Reed

CERTIFICATE OF SERVICE

The foregoing **Respondent's Appendix** in the above-captioned case was served this date by mailing a true and correct copy thereof, via first class, postage prepaid and addressed as follows **and** by electronic service through the Court's electronic filing system:

Amanda M. Roberts, Esq.
Roberts Stoffel Family Law Group
Attorney for Appellant
4411 S. Pecos Road
Las Vegas, Nevada 89121

Clerk, Nevada Supreme Court
201 S. Carson Street, Suite 201
Carson City, Nevada 89701

Dated this 10th day of January, 2022.

/s/ Elizabeth Brennan
an employee of Brennan Law Firm



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Aug 21, 2018
through
Sep 21, 2018



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U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Deposits / Credits (continued)

Date	Description of Transaction	Ref Number	Amount
Aug 21	Deposit	8358054841	527.00
Aug 28	Electronic Deposit From DoorDash, Inc. REF=182390179939900N00 TRANSFER 1800948598		225.34
Sep 4	Electronic Deposit From DoorDash, Inc. REF=182470090835510N00 TRANSFER 1800948598		319.85
Sep 4	Internet Banking Transfer From Account 157500494677		400.00
Sep 5	Deposit	8659423038	36.25
Sep 11	Electronic Deposit From DoorDash, Inc. REF=182530100419350N00 TRANSFER 1800948598		283.87
Sep 14	Mobile Banking Transfer From Account 157515405437		500.00
Sep 17	Deposit	8059679683	500.00
Sep 18	Electronic Deposit From DoorDash, Inc. REF=182600134955290N00 TRANSFER 1800948598		73.96
Total Deposits / Credits			\$ 3,366.27

Card Withdrawals

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Aug 22	Debit Purchase - VISA IHOP #3459 On 081718 INDIO CA REF # 24692168233100365375265	3100365375	\$ 31.63-
Aug 23	Debit Purchase - VISA ALLWAYS ADAPTING On 082118 COSTA MESA CA REF # 24391228234207388500475	4207388500	13.54-
Aug 23	Debit Purchase - VISA AMZN Mktp US On 082218 Amzn.com/bil WA REF # 24692168234100945558207	4100945558	13.79-
Aug 23	Debit Purchase - VISA AMZN MKTP US AMZ On 082218 AMZN.COM/BIL WA REF # 24431068234083700923931	4083700923	50.40-
Aug 27	Debit Purchase - VISA 99-CENTS-ONLY #0 On 082518 HUNTINGTON B CA REF # 24445008238500452431496	8500452431	13.84-
Aug 27	Debit Purchase 252097 JOANN STORES #14 HUNTINGTON BCA On 082518 ILK1TERM REF 823720252097	9708251557	18.13-
Aug 29	Debit Purchase - VISA BAGELMANIA COFFE On 082818 HUNTINGTON B CA REF # 24000978240900101344420	0900101344	11.25-
Aug 30	Debit Purchase - VISA SQ *SMALL BATCH On 082918 SAN JUAN CAP CA REF # 24492158241740322356180	1740322356	9.25-
Aug 30	Debit Purchase - VISA SQ *MATTERHORN G On 082918 CORONA CA REF # 24492158241740322853558	1740322853	15.00-
Aug 31	Debit Purchase 424417 TARGET T- 9882 A Huntington BCA On 083018 MAESTERM REF 424417		50.00-
Sep 4	Debit Purchase - VISA EUROPEAN WAX CEN On 090118 HUNTINGTON B CA REF # 24632698245500680920684	5500680920	6.00-
Sep 4	Debit Purchase - VISA GOLDEN SPOON FRO On 090218 HUNTINGTON B CA REF # 24692168245100972609359	5100972609	8.50-
Sep 4	Debit Purchase - VISA VZWRLSS*APOCC VI On 090118 800-922-0204 FL REF # 24692168244100308711 US1	4100308711	284.64-
Sep 5	Debit Purchase - VISA GOLDEN SPOON FRO On 090418 HUNTINGTON B CA REF # 24692168247100020777560	7100020777	3.65-
Sep 7	Debit Purchase - VISA SQ *GOSQ.COM JAN On 090618 DOWNEY CA REF # 24492158249740195025807	9740195025	66.00-
Sep 7	Debit Purchase - VISA AAA CA MBR RENEW On 090618 877-428-2277 CA REF # 24431068249083055767 US1	9083055767	138.00-
Sep 10	Debit Purchase 571694 On 090918 MAESTERM REF 571694		7.77-
Sep 10	Debit Purchase - VISA O'CONNELL'S SPOR On 090818 HUNTINGTON B CA REF # 24733098252091472000282		21.73-

RESP APP 2161

ER 000471



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Aug 21, 2018
through
Sep 21, 2018

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U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Sep 11	Debit Purchase - VISA HOAG HOSP DOLPHI	On 090918 NEWPORT BEAC CA REF # 24692168253100312316219	3100312316 5.00-
Sep 17	Debit Purchase - VISA CARL'S JR 110024	On 091318 SANTA ANA CA REF # 24431058257036000492703	7036000492 8.01-
Sep 17	Debit Purchase - VISA CINDY'S HALLMARK	On 091618 HUNTINGTON B CA REF # 24767258260000000838724	0000000838 8.81-
Sep 17	Debit Purchase - VISA 24HOUR FITNESS U	On 091518 800-432-6348 CA REF # 24692168258100170499 US1	8100170499 39.99-
Sep 18	Debit Purchase - VISA GOLDEN SPOON FRO	On 091618 HUNTINGTON B CA REF # 24692168260100290848374	0100290848 3.65-
Sep 18	Debit Purchase - VISA FOOD FOR THE HUN	On 091718 480-998-3100 AZ REF # 24765188260030018302026	0030018302 35.00-
Sep 21	Debit Purchase - VISA COMPASSION INTER	On 092118 800-336-7676 CO REF # 24493988264083053104 US1	4083053104 38.00-
Card 7754 Withdrawals Subtotal			\$ 901.58-
Total Card Withdrawals			\$ 901.58-

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Aug 21	Mobile Banking Transfer	To Account 253752156732	\$ 100.00-
Aug 22	Electronic Withdrawal REF=182340076388020N00	To TJX Rewards CC 9069872103TJX TLPAY 1662947292N	90.00-
Aug 23	Electronic Withdrawal REF=182340159013400N00	To MACY'S 9500000000ONLINE PMTUSB377145507POS	100.00-
Sep 4	Mobile Banking Transfer	To Account 157514543444	40.00-
Sep 5	Mobile Banking Payment	To Credit Card	100.00-
Sep 5	Electronic Withdrawal REF=182480052977180N00	To CAPITAL ONE CARD 9500000000ONLINE PMTUSB377145507POS	200.00-
Sep 5	Electronic Withdrawal REF=182480053086360N00	To WELLS FARGO CC 9500000000ONLINE PMTUSB377145507POS	200.00-
Sep 11	Electronic Withdrawal REF=182530064814420N00	To COMENITY PAY CP 1651180275WEB PYMT P18251204686223	85.00-
Sep 12	START Scheduled Transfer	Transfer 1200010461	100.00-
Sep 18	Internet Banking Transfer	To Account 157514543444	25.00-
Sep 18	Electronic Withdrawal REF=182610073482010N00	To SO CAL GAS 1992052494PAID SCGC 1534090996	118.56-
Sep 19	Electronic Withdrawal REF=182610135774710N00	To LENDING CLUB F5106057318885963157T1049816857	490.45-
Sep 21	Monthly Maintenance Fee		6.95-
Total Other Withdrawals			\$ 1,655.96-

	Total for Statement Period	Total Year to Date
Total Returned Item Fees	\$ 0.00	\$ 0.00
Total Overdraft Fees	\$ 0.00	\$ 36.00
TOTAL	\$ 0.00	\$ 36.00

RESP'T APP 2162

ER 000472



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Aug 21, 2018
through
Sep 21, 2018

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U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Checks Presented Conventionally

Check	Date	Ref Number	Amount
5419	Sep 20	8954689718	270.00

Conventional Checks Paid (1) \$ 270.00-

Balance Summary

Date	Ending Balance	Date	Ending Balance	Date	Ending Balance
Aug 21	928.11	Aug 31	736.62	Sep 14	1,010.30
Aug 22	806.48	Sep 4	1,117.33	Sep 17	1,453.49
Aug 23	628.75	Sep 5	649.93	Sep 18	1,345.24
Aug 27	596.78	Sep 7	445.93	Sep 19	854.79
Aug 28	822.12	Sep 10	416.43	Sep 20	584.79
Aug 29	810.87	Sep 11	610.30	Sep 21	539.84
Aug 30	786.62	Sep 12	510.30		

Balances only appear for days reflecting change.

ADDITIONAL INFORMATION

Effective September 14, 2018 the main updates to note in the revised "Your Deposit Account Agreement" booklet sections, and sub sections, include:

- Addition of *Real-Time Payment/Prohibition on Foreign Payments* section to the agreement
- Addition of *Retention of Documents* section to the agreement
- Added language pertaining to cut off time, retention of documents and large cash deposits added to the *Transaction Posting Order* section
- Clarification in the definition of "Available Balance" in the *Insufficient Funds and Overdrafts* section
- Additional language added to the *Insufficient Funds and Overdrafts* section regarding Extended Overdraft fees
- Updated language in the *Insufficient Funds and Overdrafts* section as it relates to ATM and Debit Card Overdraft Coverage options
- Title change from "Small Business" to "Business Banking"
- Added explanation pertaining to the order and possible fee(s) when linking accounts for Overdraft Transfer Protection in the *Overdraft Protection Plans* section
- Changes to eligible accounts, U.S. Bank Business Reserve Line of Credit for Business Banking and advances on U.S. Bank Business Credit Cards as it relates to overdraft protection in the *Overdraft Protection Plans* section
- Title change from "Private Client" Account to "Wealth Management" Account
- Addition of the Arbitration clause to the *U.S. Bank Consumer Reserve Line Agreement* section
- Removal of state specific language in the *Cost of Collection* section
- Updates in the Important *Military Lending Act Information* section

Effective September 14, 2018 the main updates to note in the revised "Consumer Pricing Information" brochure include:

- The addition of a new *Additional Features* section explaining all consumer checking and savings features and benefits, not previously listed in the "Consumer Pricing Information" brochure
- The addition of the *Benefits for Military and Senior Customers* explaining all the features and benefits for Military Servicemembers and Seniors, not previously listed in the "Consumer Pricing Information" brochure
- Disclosure clarification regarding fees pertaining to U.S. Bank and Non-U.S. Bank brand ATM's
- Clarification on the processing and structure of Extended Overdraft Fees
- The **Withdrawal Charge** associated with Federal Regulation D savings withdrawal limits has been further outlined in the *Miscellaneous Checking, Savings or Money Market Fees* section

Starting September 14, you may pick up copies at your local branch, view copies at usbank.com, or call 1-800-USBANKS (1-800-872-2657) for copies.

RESP'T APP 2163

ER 000473



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Aug 21, 2018
through
Sep 21, 2018

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IMAGES FOR YOUR U.S. BANK SILVER CHECKING ACCOUNT

Member FDIC

Account Number 1-537-5390-4983

Account: 455787		PLEASE POST THIS PAYMENT FOR YOUR MONTHLY CREDIT		\$270.00
ALECIA KREMIDAS-DRAPER		Pay to the order of		0000005419
20762 CRESTVIEW LN		HUNTINGTON BEACH, CA 92646-5929		SEP 19 2018
Pay THE INDICATED AMOUNT AND DATE		DOLLARS		\$ *****270.00
TO THE ORDER OF		CU OF SOUTHERN CALIFORNIA		VOID AFTER 180 DAYS
PO BOX 900		HUNTINGTON BEACH, CA 92646-0200		Signature On File
CP		This check has been processed by your depository		
⑆005419⑆ 4121201694⑆ 153753904983⑆				

5419 Sep 20 270.00

RESP'T APP 2164

ER 000474



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

4004 IMG S X ST01

On Statement

Account Number:
1 537 5390 4983

Statement Period:
Sep 22, 2018
through
Oct 19, 2018

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000052380 01 SP 106481768492166 E
ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929



To Contact U.S. Bank

By Phone:

1-800-US BANKS
(1-800-872-2657)

U.S. Bank accepts Relay Calls

Internet:

usbank.com

INFORMATION YOU SHOULD KNOW

Effective November 12th, 2018 the "Your Deposit Account Agreement" booklet will include a number of updates and may affect your rights. Starting November 12th, you may pick up a copy at your local branch, view a copy on usbank.com, or call 1-800-USBANKS (1-800-872-2657) for a copy. The main updates that were made to "Your Deposit Account Agreement" booklet sections and sub sections include:

- Under sub section **Consumer Overdraft Protection** - additional language on overdraft protection advancement.
- Under sub section **Business Banking Overdraft Protection** - additional language on overdraft protection advancement.
- Removal of sub section **Returns at Merchants** and the daily limit.
- Update to the hours of operation for the U.S. Bank Business Service Center.

Updates to Online and Mobile Financial Services Agreement

Review the changes being made by clicking on the banner on your My Accounts page in Online Banking to learn more.

U.S. BANK SILVER CHECKING

U.S. Bank National Association

Member FDIC

Account Number 1-537-5390-4983

Account Summary

Beginning Balance on Sep 22	\$	539.84	Number of Days in Statement Period	28
Deposits / Credits		2,180.00	Average Account Balance	\$ 388.11
Card Withdrawals		512.36-		
Other Withdrawals		1,687.38-		
Ending Balance on Oct 19, 2018	\$	520.10		

Overdraft Protection

The following account(s) are linked to your checking account for Overdraft Protection. The account(s) are listed in the order that they would be used to transfer funds to your checking account if the available account balance is negative. If you wish to make changes to your Overdraft Protection account order; log in to your account at usbank.com, visit your local U.S. Bank branch or call U.S. Bank 24-Hour Banking at the number listed above.

1st Position: U.S. Bank Package Money Market Savings account ending in 6732

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Oct 1	Internet Banking Transfer	From Account 157500494677	\$ 440.00
Oct 3	Internet Banking Transfer	From Account 157515405437	500.00
Oct 15	Mobile Banking Transfer	From Account 157515405437	500.00
Oct 16	Internet Banking Transfer	From Account 253752156732	240.00
Oct 19	Mobile Banking Transfer	From Account 157515405437	500.00
Total Deposits / Credits			\$ 2,180.00

Card Withdrawals

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Sep 26	Debit Purchase - VISA	On 092518 COSTA MESA CA	\$ 66.00-
	SQ *GOSQ.COM JAN	REF # 24492158268741369186058	
Oct 2	Debit Purchase - VISA	On 100118 800-922-0204 FL	284.45-
	VZWRLSS*APOCC VI	REF # 24692168274100044064 US1	

RESP'T APP 2165

ER 000475



To keep track of all your transactions, you should balance your account every month. Please examine this statement immediately. We will assume that the balance and transactions shown are correct unless you notify us of an error.

Outstanding Deposits

DATE	AMOUNT
TOTAL	\$

Outstanding Withdrawals

DATE	AMOUNT
TOTAL	\$

1. List any deposits that do not appear on your statement in the Outstanding Deposits section at the left. Record the total.
2. Check off in your checkbook register all checks, withdrawals (including Debit Card and ATM) and automatic payments that appear on your statement. Withdrawals that are NOT checked off should be recorded in the Outstanding Withdrawals section at the left. Record the total.
3. Enter the ending balance shown on this statement. \$
4. Enter the total deposits recorded in the Outstanding Deposits section. \$
5. Total lines 3 and 4. \$
6. Enter the total withdrawals recorded in the Outstanding Withdrawals section. \$
7. Subtract line 6 from line 5. This is your balance. \$
8. Enter in your register and subtract from your register balance any checks, withdrawals or other debits (including fees, if any) that appear on your statement but have not been recorded in your register.
9. Enter in your register and add to your register balance any deposits or other credits (including interest, if any) that appear in your statement but have not been recorded in your register.
10. The balance in your register should be the same as the balance shown in #7. If it does not match, review and check all figures used, and check the addition and subtraction in your register. If necessary, review and balance your statement from the previous month.

IMPORTANT DISCLOSURES TO OUR CONSUMER CUSTOMERS

In Case of Errors or Questions About Your Checking, Savings, ATM, Debit Card, ACH, Bill Pay and Other Electronic Transfers

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 appeared. Telephone us at the number listed on the front of this statement or write to us at U.S. Bank P.O. Box 64991 St. Paul, MN 55164-9505.

- Tell us your name and account number.
- 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.
- Tell us the dollar amount of the suspected error.

We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, we may take up to 45 days to investigate your complaint. For errors involving new accounts, point-of-sale, or foreign-initiated transactions, we may take up to 90 days to investigate your complaint. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

*Please note: Paper draft and paper check claims must be disputed within 30 days per Your Deposit Account Agreement.

IMPORTANT DISCLOSURES TO OUR BUSINESS CUSTOMERS

Errors related to any transaction on a business account will be governed by any agreement between us and/or all applicable rules and regulations governing such transactions, including the rules of the National Automated Clearing House Association (NACHA Rules) as may be amended from time to time. If you think this statement is wrong, please telephone us at the number listed on the front of this statement immediately.

CONSUMER BILLING RIGHTS SUMMARY REGARDING YOUR RESERVE LINE

What To Do If You Think You Find A Mistake on Your Statement

If you think there is an error on your statement, write to us at:

U.S. Bank, P.O. Box 3528, Oshkosh, WI 54903-3528.

In your letter, give us the following information:

- **Account information:** Your name and account number.
- **Dollar Amount:** The dollar amount of the suspected error.
- **Description of problem:** If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement.

You must notify us of any potential errors *in writing*. You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

Reserve Line Balance Computation Method: To determine your **Balance Subject to Interest Rate**, use the dates and balances provided in the Reserve Line Balance Summary section. The date next to the first Balance Subject to Interest is day one for that balance and is applicable up to (but not including) the date of the next balance (if there is one). We multiply the Balance Subject to Interest by the number of days it is applicable and add them up to get the same number of days in the billing cycle. We then divide the result by the number of billing days in the cycle. This is your **Balance Subject to Interest Rate**. Any unpaid interest charges and unpaid fees are not included in the Balance Subject to Interest. The *****INTEREST CHARGE***** begins from the date of each advance.

REPORTS TO AND FROM CREDIT BUREAUS FOR RESERVE LINES

We may report information about your account to credit bureaus. Late payments, missed payments or other defaults on your account may be reflected in your credit report.

CONSUMER REPORT DISPUTES

We may report information about negative account activity on consumer and small business deposit accounts and consumer reserve lines to Consumer Reporting Agencies (CRA). As a result, this may prevent you from obtaining services at other financial institutions. If you believe we have inaccurately reported information to a CRA, you may submit a dispute by calling 844.624.8230 or by writing to: U.S. Bank Attn: CRA Management, P.O. Box 3447, Oshkosh, WI 54903-3447. In order for us to assist you with your dispute, you must provide: your name, address and phone number; the account number; the specific information you are disputing; the explanation of why it is incorrect; and any supporting documentation (e.g., affidavit of identity theft), if applicable.

RESP'T APP 2166





ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Sep 22, 2018
through
Oct 19, 2018

Page 2 of 3



U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Oct 3	Debit Purchase - VISA MCDONALD'S F1795	On 100218 COSTA MESA CA REF # 24427338275720041753443	5720041753 7.74-
Oct 4	Debit Purchase - VISA SQ *PORTOLA COFF	On 100318 HUNTINGTON B CA REF # 24492158276741458781918	6741458781 4.30-
Oct 4	Debit Purchase 056289	B. Candy (HB) Huntington BCA On 100318 ILNKILNK REF 827677056289	8910032121 6.35-
Oct 4	Debit Purchase - VISA DAFFY'S TROPIC C	On 100318 LAGUNA NIGUE CA REF # 24275398276900010200255	6900010200 11.28-
Oct 4	Debit Purchase 659310	TOP DOG BARKERY HUNTINGTN BCCA On 100318 MAESTER REF 659310	23.14-
Oct 5	Debit Purchase - VISA GOLDEN SPOON FRO	On 100418 HUNTINGTON B CA REF # 24692168277100921576791	7100921576 6.65-
Oct 16	Debit Purchase - VISA GOLDEN SPOON FRO	On 101418 HUNTINGTON B CA REF # 24692168288100057252859	8100057252 7.30-
Oct 16	Debit Purchase - VISA 24 Hour Fitness	On 101518 800-4326348 CA REF # 24204298288309596483 US1	8309596483 39.99-
Oct 18	Debit Purchase - VISA RMCF - HUNTINGTO	On 101618 HUNTINGTON B CA REF # 24269798290100321174338	0100321174 20.16-
Oct 18	Debit Purchase - VISA FOOD FOR THE HUN	On 101718 480-998-3100 AZ REF # 24765188290030018871479	0030018871 35.00-
Card 7754 Withdrawals Subtotal			\$ 512.36-
Total Card Withdrawals			\$ 512.36-

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Sep 26	Electronic Withdrawal REF=182680177821970N00	To MACY'S 9500000000ONLINE PMTUSB377145507POS	\$ 100.00-
Sep 26	Electronic Withdrawal REF=182680177837930N00	To TJ MAXX 9500000000ONLINE PMTUSB377145507POS	100.00-
Oct 3	Electronic Withdrawal REF=182750044716890N00	To COMENITY PAY CP 1651180275WEB PYMT P18275210471423	81.53-
Oct 3	Internet Banking Payment	To Credit Card *****8121	100.00-
Oct 4	Electronic Withdrawal REF=182770102636980N00	To CAPITAL ONE CARD 9500000000ONLINE PMTUSB377145507POS	200.00-
Oct 4	Electronic Withdrawal REF=182770102686170N00	To WELLS FARGO CC 9500000000ONLINE PMTUSB377145507POS	240.00-
Oct 12	Internet Banking Transfer	To Account 157514543444	30.00-
Oct 12	START Scheduled Transfer	Transfer 1200007057	100.00-
Oct 15	Mobile Banking Transfer	To Account 157514543444	20.00-
Oct 18	Mobile Banking Transfer	To Account 157514543444	30.00-
Oct 18	Mobile Banking Transfer	To Account 157514543444	60.00-
Oct 18	Electronic Withdrawal REF=182910098497640N00	To SO CAL GAS 1992052494PAID SCGC 1534090996	108.45-
Oct 19	Monthly Maintenance Fee		6.95-
Oct 19	Mobile Banking Transfer	To Account 157514543444	20.00-
Oct 19	Electronic Withdrawal REF=182920057474190N00	To LENDING CLUB F5106057318885963157T1052479822	490.45-
Total Other Withdrawals			\$ 1,687.38-

RESP'T APP 2167

ER 000477



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Sep 22, 2018
through
Oct 19, 2018

Page 3 of 3

U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

	Total for Statement Period	Total Year to Date
Total Returned Item Fees	\$ 0.00	\$ 0.00
Total Overdraft Fees	\$ 0.00	\$ 36.00
TOTAL	\$ 0.00	\$ 36.00

Balance Summary

<u>Date</u>	<u>Ending Balance</u>	<u>Date</u>	<u>Ending Balance</u>	<u>Date</u>	<u>Ending Balance</u>
Sep 26	273.84	Oct 4	255.05	Oct 16	791.11
Oct 1	713.84	Oct 5	248.40	Oct 18	537.50
Oct 2	429.39	Oct 12	118.40	Oct 19	520.10
Oct 3	740.12	Oct 15	598.40		

Balances only appear for days reflecting change.

RESP'T APP 2168

ER 000478



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

4004 IMG S X ST01

On Statement

Account Number:
1 537 5390 4983

Statement Period:
Oct 20, 2018
through
Nov 21, 2018

Page 1 of 4



000016229 01 SP 106481807407829 E
ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929



To Contact U.S. Bank

By Phone:

1-800-US BANKS
(1-800-872-2657)

U.S. Bank accepts Relay Calls

Internet:

usbank.com

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U.S. BANK SILVER CHECKING

Member FDIC

U.S. Bank National Association

Account Number 1-537-5390-4983

Account Summary

Beginning Balance on Oct 20	\$	520.10	Number of Days in Statement Period	33
Deposits / Credits		19,596.71	Average Account Balance	\$ 5,468.63
Card Withdrawals		1,365.52-		
Other Withdrawals		5,707.04-		
Checks Paid		670.00-		
Ending Balance on Nov 21, 2018	\$	12,374.25		

Overdraft Protection

The following account(s) are linked to your checking account for Overdraft Protection. The account(s) are listed in the order that they would be used to transfer funds to your checking account if the available account balance is negative. If you wish to make changes to your Overdraft Protection account order; log in to your account at usbank.com, visit your local U.S. Bank branch or call U.S. Bank 24-Hour Banking at the number listed above.

1st Position: U.S. Bank Package Money Market Savings account ending in 6732

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Oct 25	Visa Direct Allstate Insuran	7110241302	\$ 250.00
Oct 25	Deposit	8954958317	800.00
Oct 26	Visa Direct Allstate Insuran	0710251134	1,396.71
Nov 2	Internet Banking Transfer From Account 157500494677		450.00
Nov 5	Internet Banking Transfer From Account 157500494677		100.00
Nov 5	Deposit	8150556586	9,300.00
Nov 19	Deposit	8059181603	5,000.00
Nov 21	Deposit	8656453674	300.00
Nov 21	Mobile Banking Transfer From Account 157515405437		2,000.00
Total Deposits / Credits			\$ 19,596.71

Card Withdrawals

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Oct 22	Debit Purchase - VISA On 101918 800-336-7676 CO	2083004464	\$ 38.00-
	COMPASSION INTER REF # 24493988292083004464 US1		
Oct 26	Debit Purchase - VISA On 102518 GARDEN GROVE CA	8432530000	5.50-
	THE BAGELRY & BI REF # 24071058298432530000353		
Oct 26	Debit Purchase - VISA On 102518 HUNTINGTON B CA	8264701349	16.10-
	BAGELMANIA COFFE REF # 24000978298264701349946		
Oct 26	Debit Purchase - VISA On 102518 800-336-7676 CO	8083003694	25.00-
	COMPASSION INTER REF # 24493988298083003694 US		
Oct 29	Debit Purchase - VISA On 102718 HUNTINGTN BC CA	0740292976	3.00-
	SQ *MOONWOOD COF REF # 24492158300740292976692		

RESP'T APP 2169

ER 000479



To keep track of all your transactions, you should balance your account every month. Please examine this statement immediately. We will assume that the balance and transactions shown are correct unless you notify us of an error.

Outstanding Deposits

DATE	AMOUNT
TOTAL	\$

Outstanding Withdrawals

DATE	AMOUNT
TOTAL	\$

1. List any deposits that do not appear on your statement in the Outstanding Deposits section at the left. Record the total.
2. Check off in your checkbook register all checks, withdrawals (including Debit Card and ATM) and automatic payments that appear on your statement. Withdrawals that are NOT checked off should be recorded in the Outstanding Withdrawals section at the left. Record the total.
3. Enter the ending balance shown on this statement. \$ _____
4. Enter the total deposits recorded in the Outstanding Deposits section. \$ _____
5. Total lines 3 and 4. \$ _____
6. Enter the total withdrawals recorded in the Outstanding Withdrawals section. \$ _____
7. Subtract line 6 from line 5. This is your balance. \$ _____
8. Enter in your register and subtract from your register balance any checks, withdrawals or other debits (including fees, if any) that appear on your statement but have not been recorded in your register.
9. Enter in your register and add to your register balance any deposits or other credits (including interest, if any) that appear in your statement but have not been recorded in your register.
10. The balance in your register should be the same as the balance shown in #7. If it does not match, review and check all figures used, and check the addition and subtraction in your register. If necessary, review and balance your statement from the previous month.

IMPORTANT DISCLOSURES TO OUR CONSUMER CUSTOMERS

In Case of Errors or Questions About Your Checking, Savings, ATM, Debit Card, ACH, Bill Pay and Other Electronic Transfers

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 appeared. Telephone us at the number listed on the front of this statement or write to us at U.S. Bank P.O. Box 64991 St. Paul, MN 55164-9505.

- Tell us your name and account number.
- 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.
- Tell us the dollar amount of the suspected error.

We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, we may take up to 45 days to investigate your complaint. For errors involving new accounts, point-of-sale, or foreign-initiated transactions, we may take up to 90 days to investigate your complaint. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

*Please note: Paper draft and paper check claims must be disputed within 30 days per Your Deposit Account Agreement.

IMPORTANT DISCLOSURES TO OUR BUSINESS CUSTOMERS

Errors related to any transaction on a business account will be governed by any agreement between us and/or all applicable rules and regulations governing such transactions, including the rules of the National Automated Clearing House Association (NACHA Rules) as may be amended from time to time. If you think this statement is wrong, please telephone us at the number listed on the front of this statement immediately.

CONSUMER BILLING RIGHTS SUMMARY REGARDING YOUR RESERVE LINE

What To Do if You Think You Find A Mistake on Your Statement

If you think there is an error on your statement, write to us at:

U.S. Bank, P.O. Box 3528, Oshkosh, WI 54903-3528.

In your letter, give us the following information:

- **Account Information:** Your name and account number.
- **Dollar Amount:** The dollar amount of the suspected error.
- **Description of problem:** If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement.

You must notify us of any potential errors *in writing*. You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

Reserve Line Balance Computation Method: To determine your **Balance Subject to Interest Rate**, use the dates and balances provided in the Reserve Line Balance Summary section. The date next to the first Balance Subject to Interest is day one for that balance and is applicable up to (but not including) the date of the next balance (if there is one). We multiply the Balance Subject to Interest by the number of days it is applicable and add them up to get the same number of days in the billing cycle. We then divide the result by the number of billing days in the cycle. This is your **Balance Subject to Interest Rate**. Any unpaid interest charges and unpaid fees are not included in the Balance Subject to Interest. The ***INTEREST CHARGE*** begins from the date of each advance.

REPORTS TO AND FROM CREDIT BUREAUS FOR RESERVE LINES

We may report information about your account to credit bureaus. Late payments, missed payments or other defaults on your account may be reflected in your credit report.

CONSUMER REPORT DISPUTES

We may report information about negative account activity on consumer and small business deposit accounts and consumer reserve lines to Consumer Reporting Agencies (CRA). As a result, this may prevent you from obtaining services at other financial institutions. If you believe we have inaccurately reported information to a CRA, you may submit a dispute by calling 844.624.8230 or by writing to: U.S. Bank Attn: CRA Management, P.O. Box 3447, Oshkosh, WI 54903-3447. In order for us to assist you with your dispute, you must provide: your name, address and phone number; the account number; the specific information you are disputing; the explanation of why it is incorrect; and any supporting documentation (e.g., affidavit of identity theft), if applicable.

RESP'T APP 2170



ER 000480



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Oct 20, 2018
through
Nov 21, 2018



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U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Nov 2	Debit Purchase - VISA VZWRLSS*APOCC VI	On 110118 800-922-0204 FL REF # 24692168305100509081 US1	5100509081 284.65-
Nov 5	Debit Purchase - VISA CITY OF HB BEACH	On 110418 HUNTINGTN BC CA REF # 24755428308263089103520	8263089103 7.00-
Nov 5	Debit Purchase - VISA THE DONUTTERY IN	On 110418 HUNTINGTON B CA REF # 24493988309091698002976	9091698002 7.37-
Nov 5	Debit Purchase - VISA CARL'S JR #11001	On 110318 HUNTINGTON B CA REF # 24431058308286388900673	8286388900 10.23-
Nov 5	Debit Purchase - VISA BSU UPAY COMBINE	On 110318 208-4261011 ID REF # 24013398308000672108992	8000672108 50.00-
Nov 6	Debit Purchase - VISA SQ *GOSQ.COM JAN	On 110518 COSTA MESA CA REF # 24492158309741470076249	9741470076 90.00-
Nov 8	Debit Purchase 229511	HOMEGOODS 7742 E HUNTINGTON BCA On 110718 MAESTER REF 229511	4411081221 13.65-
Nov 8	Debit Purchase 135844	USPS PO 05359604 HUNTINGTON BCA On 110818 ILK1TERM REF 831218135844	3000775437 7.27-
Nov 9	Debit Purchase - VISA 99-CENTS-ONLY #0	On 110818 HUNTINGTON CA REF # 24445008313000775437591	5511082059 59.97-
Nov 9	Debit Purchase 469455	PAPER SOURCE -HU HUNTINGTON BCA On 110818 ILK1TERM REF 831302469455	9811082024 161.59-
Nov 9	Debit Purchase 444298	VERIZON WIRELESS HUNTINGTON BCA On 110818 ILNKILNK REF 831302444298	3500630198 6.00-
Nov 13	Debit Purchase - VISA EUROPEAN WAX CEN	On 110818 HUNTINGTON B CA REF # 24632698313500630198503	3063174855 12.00-
Nov 13	Debit Purchase - VISA COLLEGEBOARD*SAT	On 110918 212-7137789 NY REF # 24906418313063174855493	6100919711 50.00-
Nov 13	Debit Purchase - VISA THE TOLL ROADS O	On 111218 949-727-4800 CA REF # 24692168316100919711 US1	3161500754 95.04-
Nov 13	Debit Purchase - VISA SALON DIVA	On 110818 LAGUNA NIGUE CA REF # 24207858313161500754712	4026903237 105.00-
Nov 13	Debit Purchase - VISA PTICKET.COM-HUNT	On 110918 800-553-4412 CA REF # 24493988314026903237127	4133140949 165.00-
Nov 13	Debit Purchase - VISA CALSTATEAPPLY	On 110918 857-3042087 CA REF # 24755428314133140949017	2030035590 35.00-
Nov 19	Debit Purchase - VISA FOOD FOR THE HUN	On 111718 480-998-3100 AZ REF # 24765188322030035590435	0000364350 39.99-
Nov 19	Debit Purchase - VISA 24 Hour Fitness	On 111618 800-4326348 CA REF # 24204298320000364350 US1	3083031586 38.00-
Nov 20	Debit Purchase - VISA COMPASSION INTER	On 111918 800-336-7676 CO REF # 24493988323083031586 US1	4427401889 27.61-
Nov 21	Debit Purchase - VISA FORTUNE COOKIES	On 111918 FOUNTAIN VAL CA REF # 24275478324427401889274	

Card 7754 Withdrawals Subtotal \$ 1,365.52-

Total Card Withdrawals \$ 1,365.52-

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Oct 30	Electronic Withdrawal REF=183030090293440N00	To MACY'S 9500000000ONLINE PMTUSB377145507POS	\$ 100.00-
Oct 30	Electronic Withdrawal REF=183030090317470N00	To TJ MAXX 9500000000ONLINE PMTUSB377145507POS	100.00-

RESP'T APP 2171

ER 000481



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Oct 20, 2018
through
Nov 21, 2018

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U.S. BANK SILVER CHECKING**(CONTINUED)**

U.S. Bank National Association

Account Number 1-537-5390-4983

Other Withdrawals (continued)

<i>Date</i>	<i>Description of Transaction</i>	<i>Ref Number</i>	<i>Amount</i>
Nov 5	Mobile Banking Transfer	To Account 157514543444	95.00-
Nov 6	Electronic Withdrawal	To CAPITAL ONE CARD	200.00-
	REF=183100108143140N00	9500000000ONLINE	
		PMTUSB377145507POS	
Nov 9	Internet Banking Payment	To Credit Card *****8121	1,546.59-
Nov 13	START Scheduled Transfer	Transfer	100.00-
		1300014660	
Nov 13	Electronic Withdrawal	To WELLS FARGO CC	3,000.00-
	REF=183170028787000N00	9500000000ONLINE	
		PMTUSB377145507POS	
Nov 19	Internet Banking Transfer	To Account 157514543444	75.00-
Nov 19	Electronic Withdrawal	To LENDING CLUB	490.45-
	REF=183230046720570N00	F5106057318885963157T1055837247	
Total Other Withdrawals			\$ 5,707.04-

Total for Statement Period		Total Year to Date
Total Returned Item Fees	\$ 0.00	\$ 0.00
Total Overdraft Fees	\$ 0.00	\$ 36.00
TOTAL	\$ 0.00	\$ 36.00

Checks Presented Conventionally

<i>Check</i>	<i>Date</i>	<i>Ref Number</i>	<i>Amount</i>	<i>Check</i>	<i>Date</i>	<i>Ref Number</i>	<i>Amount</i>
0684	Nov 5	8057010050	125.00	5428	Nov 19	8054151220	270.00
5427*	Nov 13	8358030038	275.00				

* Gap in check sequence

Conventional Checks Paid (3) **\$ 670.00-**

Balance Summary

<i>Date</i>	<i>Ending Balance</i>	<i>Date</i>	<i>Ending Balance</i>	<i>Date</i>	<i>Ending Balance</i>
Oct 22	482.10	Nov 2	2,844.56	Nov 13	6,050.30
Oct 25	1,532.10	Nov 5	11,949.96	Nov 19	10,139.86
Oct 26	2,882.21	Nov 6	11,659.96	Nov 20	10,101.86
Oct 29	2,879.21	Nov 8	11,633.76	Nov 21	12,374.25
Oct 30	2,679.21	Nov 9	9,858.34		

Balances only appear for days reflecting change.

RESP'T APP 2172

ER 000482



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Oct 20, 2018
through
Nov 21, 2018

Page 4 of 4



IMAGES FOR YOUR U.S. BANK SILVER CHECKING ACCOUNT

Member FDIC

Account Number 1-537-5390-4983

ALECIA A KREMIDAS-DRAPER
2217 FLORIDA ST. APT 8
HUNTINGTN BCH, CA 92646-5929

NOV/2018 684

DATE Nov 12 2018

PAY TO THE ORDER OF ARK Plumbing \$ 125.00

One Hundred and Twenty Five dollars and 00/100

USbank. All of US serving you

1212016941 153753904983 0684

0684 Nov 05 125.00

Account: 489787 PLEASE POST THIS PAYMENT FOR OUR MUTUAL CUSTOMER \$270.00

Please Direct Any Questions To
OUR OPERATIONS DEPARTMENT

ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH, CA 92646-5929

NOV/2018 0000005428

November 15, 2018

U.S. BANK NA

Pay TWO HUNDRED SEVENTY AND 00/100 DOLLARS \$ *****270.00

TO CL OF SOUTHERN CALIFORNIA
THE PO BOX 200
ORDER WHITTIER, CA 90606-0200

Void After 180 DAYS
Signature On File
This check has been authorized
by your supervisor

0005428 1212016941 153753904983

5428 Nov 19 270.00

Account: 489787 PLEASE POST THIS PAYMENT FOR OUR MUTUAL CUSTOMER \$275.00

Please Direct Any Questions To
OUR OPERATIONS DEPARTMENT

ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH, CA 92646-5929

NOV/2018 0000005427

November 09, 2018

U.S. BANK NA

Pay TWO HUNDRED SEVENTY FIVE AND 00/100 DOLLARS \$ *****275.00

TO CL OF SOUTHERN CALIFORNIA
THE PO BOX 200
ORDER WHITTIER, CA 90606-0200

Void After 180 DAYS
Signature On File
This check has been authorized
by your supervisor

0005427 1212016941 153753904983

5427* Nov 13 275.00

* Gap in check sequence

RESP'T APP 2173

ER 000483

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RESP'T APP 2174

ER 000484



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

4004 IMG S X ST01

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Nov 22, 2018
through
Dec 20, 2018

Page 1 of 6



000007447 01 SP 106481844156385 E
ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929



To Contact U.S. Bank

By Phone:

1-800-US BANKS
(1-800-872-2657)

U.S. Bank accepts Relay Calls

Internet:

usbank.com

NEWS FOR YOU

Give a Visa® Gift Card. Available at any U.S. Bank branch.

INFORMATION YOU SHOULD KNOW

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- In section "Terms Applicable to all Deposit Accounts", there is an update in the "Arbitration" subsection now titled "Resolution of Disputes by Arbitration".

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- Additional rate benefits for all U.S. Bank personal checking accounts
- Updated disclosure regarding online banking with free credit score access
- Additional Monthly Maintenance Fee waive criteria for Easy Checking and Standard Savings accounts
- Updated Paper Statement Fee waive criteria for Easy Checking
- Additional benefit to military service members

For Nevada residents: Privacy Notice - We may contact our existing customers by telephone to offer additional financial products that we believe may be of interest to you. You have the right to opt out of these calls by adding your name to our internal do-not-call list. To opt out of these calls, or for more information about your opt out rights, please contact our customer service department. You can reach us by calling 800-USBANKS (800-872-2657), clicking the "Email Us" link at usbank.com/privacy, or writing to P.O. Box 64490, St. Paul, MN 55164. You are being provided this notice under Nevada state law. In addition to contacting U.S. Bank, Nevada residents can contact the Nevada Attorney General for more information about your opt out rights by calling 702-486-3132, emailing aginfo@ag.nv.gov, or by writing to: Office of the Attorney General, Nevada Department of Justice, Bureau of Consumer Protection, 100 North Carson Street, Carson City, NV 89701-4717.

Protecting your accounts is our highest priority. We have many safeguards in place to help ensure your accounts are secure. One of these is to close long-term inactive cards. If your U.S. Bank Visa Debit or ATM Card has not been used within the last 12 months, it may be closed. You will be notified at a later date in the event that your card will be closed. Please call us with any questions at 800-USBANKS (800-872-2657).

U.S. BANK SILVER CHECKING

U.S. Bank National Association

Member FDIC

Account Number 1-537-5390-4983

Account Summary

Beginning Balance on Nov 22	\$	12,374.25	Number of Days in Statement Period	29
Deposits / Credits		9,345.00	Average Account Balance	\$ 6,959.16
Card Withdrawals		2,912.94-		
Other Withdrawals		9,797.05-		
Checks Paid		6,396.71-		
Ending Balance on Dec 20, 2018	\$	2,612.55		

RESP'T APP 2175

ER 000485



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Nov 22, 2018
through
Dec 20, 2018



Page 2 of 6

U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Overdraft Protection

The following account(s) are linked to your checking account for Overdraft Protection. The account(s) are listed in the order that they would be used to transfer funds to your checking account if the available account balance is negative. If you wish to make changes to your Overdraft Protection account order, log in to your account at usbank.com, visit your local U.S. Bank branch or call U.S. Bank 24-Hour Banking at the number listed above.

1st Position: U.S. Bank Package Money Market Savings account ending in 6732

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Nov 23	Deposit	9255721390	\$ 5,000.00
Dec 3	Deposit	8150597894	840.00
Dec 7	Internet Banking Transfer From Account 157514543444		25.00
Dec 12	Mobile Banking Transfer From Account 157508344635		500.00
Dec 13	Internet Banking Transfer From Account 157500494677		480.00
Dec 18	Deposit	8358726668	500.00
Dec 18	Internet Banking Transfer From Account 157515405437		2,000.00
Total Deposits / Credits			\$ 9,345.00

Card Withdrawals

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Nov 23	Debit Purchase - VISA NEKTER JUICE BAR	On 112018 HUNTINGTON B CA REF # 24013398325004400101708	5004400101 \$ 7.30-
Nov 23	Debit Purchase - VISA GROUPON INC	On 112218 GROUPON.COM IL REF # 24692168326100717684883	6100717684 36.00-
Nov 23	Debit Purchase 459148	SOCK HARBOR HUNT HUNTINGTON BCA On 112318 MAESTER REF 459148	38.76-
Nov 23	Debit Purchase - VISA GROUPON INC	On 112218 GROUPON.COM IL REF # 24692168326100718223368	6100718223 48.00-
Nov 23	Debit Purchase - VISA GROUPON INC	On 112218 GROUPON.COM IL REF # 24692168326100716757854	6100716757 60.00-
Nov 23	Debit Purchase - VISA GROUPON INC	On 112218 GROUPON.COM IL REF # 24692168326100717722923	6100717722 92.25-
Nov 23	Debit Purchase - VISA CALIBER GARAGE D	On 112118 909-9490335 CA REF # 24512398325900010106522	5900010106 150.00-
Nov 23	Debit Purchase 775287	TILLYS #4 HUNTINGTON BCA On 112318 ILK1TERM REF 832718775287	8711231203 174.48-
Nov 23	Debit Purchase 221094	WAL-MART HUNTINGTON BCA On 112118 MAESTER REF 221094	210.00-
Nov 26	Debit Purchase - VISA CITY OF HB BEACH	On 112318 HUNTINGTN BC CA REF # 24755428327153276036731	7153276036 2.00-
Nov 26	Debit Purchase - VISA GROUPON INC	On 112518 GROUPON.COM IL REF # 24692168329100528736366	9100528736 17.93-
Nov 26	Debit Purchase - VISA GROUPON INC	On 112518 GROUPON.COM IL REF # 24692168329100529004012	9100529004 23.58-
Nov 26	Debit Purchase 112327	GAMESTOP #5591 7 HUNTINGTON BCA On 112418 ILNKILNK REF 832904112327	2711242219 51.00-
Nov 26	Debit Purchase - VISA GROUPON INC	On 112418 GROUPON.COM IL REF # 24692168328100264655797	8100264655 57.90-
Nov 26	Debit Purchase 050373	KOHL'S 0654 7777 HUNTINGTON BCA On 112318 ILK1TERM REF 832723050373	7311231700 161.32-
Nov 27	Debit Purchase - VISA GROUPON INC	On 112718 GROUPON.COM IL REF # 24692168331100200211254	1100200211 7.50-
Nov 27	Debit Purchase - VISA GROUPON INC	On 112718 GROUPON.COM IL REF # 24692168331100201143654	1100201143 11.79-
Nov 27	Debit Purchase - VISA GROUPON INC	On 112718 GROUPON.COM IL REF # 24692168331100200427564	1100200427 16.08-

RESP T APP 2176

ER 000486



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Nov 22, 2018
through
Dec 20, 2018

Page 3 of 6

U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Nov 28	Debit Purchase - VISA GROUPON INC	On 112818 GROUPON.COM IL REF # 24692168332100848785437	2100848785 17.15-
Nov 29	Debit Purchase - VISA 3614 EL POLLO LO	On 112718 HUNTINGTON B CA REF # 24013398332005432406255	2005432406 19.46-
Nov 29	Debit Purchase 186804	THE UPS STORE #4 HUNTINGTON BCA On 112918 MAESTERM REF 186804	66.61-
Dec 3	Debit Purchase 844933	WALGREENS STORE HUNTINGTON BCA On 120218 ILK1TERM REF 833619844933	3312021339 17.83-
Dec 3	Debit Purchase - VISA THE BAGELRY & BI	On 113018 GARDEN GROVE CA REF # 24022448334900011900449	4900011900 17.87-
Dec 3	Debit Purchase 615863	SMART AND FINAL HUNTINGTON BCA On 120318 MAESTERM REF 615863	25.00-
Dec 3	Debit Purchase - VISA VZWRLSS*APOCC VI	On 120118 800-922-0204 FL REF # 24692168335100055700 US1	5100055700 284.65-
Dec 4	Debit Purchase - VISA FRESH BAGELS & C	On 120218 HUNTINGTON B CA REF # 24412898337030019990571	7030019990 9.95-
Dec 4	Debit Purchase - VISA EGGROLL KING C Y	On 120318 HUNTINGTON B CA REF # 24717058338733389234247	8733389234 26.63-
Dec 5	Debit Purchase 211495	CHEVRON/G&M OIL HUNTINGTON BCA On 120418 ILK1TERM REF 833900211495	9512042328 4.19-
Dec 5	Debit Purchase - VISA BOSSCAT KITCHEN	On 120318 NEWPORT BEAC CA REF # 24622758338100295060109	8100295060 38.25-
Dec 6	Debit Purchase - VISA CHEVRON 0098643	On 120518 HUNTINGTON B CA REF # 24692168339100564759650	9100564759 42.11-
Dec 7	Debit Purchase - VISA BURGER KING #126	On 120518 IRVINE CA REF # 24186168340091309002821	0091309002 6.99-
Dec 10	Debit Purchase 706900	SMART AND FINAL HUNTINGTON BCA On 120918 MAESTERM REF 706900	164.31-
Dec 11	Debit Purchase 384612	SHELL Service St LAKE FOREST CA On 121118 ILK1TERM REF 834511384612	1212111018 42.70-
Dec 13	Debit Purchase - VISA USPS PO 05359675	On 121218 HUNTINGTON B CA REF # 24445008347000962503783	7000962503 13.65-
Dec 14	Debit Purchase - VISA ISLANDS REST 005	On 121318 FOUNTAIN VAL CA REF # 24692168347100792591867	7100792591 15.87-
Dec 14	Debit Purchase 117930	THE UPS STORE #4 HUNTINGTON BCA On 121418 MAESTERM REF 117930	89.01-
Dec 17	Debit Purchase 468443	VONS HUNTINGTON BCA On 121718 ILNKILNK REF 835106468443	4312170040 3.49-
Dec 17	Debit Purchase - VISA CARL'S JR #11001	On 121418 HUNTINGTON B CA REF # 24431058349286388900401	9286388900 9.14-
Dec 17	Debit Purchase - VISA SMART AND FINAL	On 121518 HUNTINGTON B CA REF # 24231688350837000499966	0837000499 16.74-
Dec 17	Debit Purchase - VISA SMART AND FINAL	On 121518 HUNTINGTON B CA REF # 24231688350837000499974	0837000499 36.25-
Dec 17	Debit Purchase 163734	THE UPS STORE #4 HUNTINGTON BCA On 121718 MAESTERM REF 163734	39.55-
Dec 17	Debit Purchase - VISA 24 Hour Fitness	On 121518 800-4326348 CA REF # 24204298349000333283 US1	9000333283 39.99-
Dec 17	Debit Purchase 487142	BEST BUY #111 WESTMINSTER CA On 121718 MAESTERM REF 487142	153.29-
Dec 18	Debit Purchase - VISA FOOD FOR THE HUN	On 121718 480-998-3100 AZ REF # 24765188351030018186510	1030018186 35.00-
Dec 18	Debit Purchase 246222	TOTAL WINE AND M HUNTINGTON BCA On 121718 ILK1TERM REF 83512171654	2212171654 156.26-

RESP'T APP 2177

ER 000487



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Nov 22, 2018
through
Dec 20, 2018

Page 4 of 6



U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Dec 19	Debit Purchase - VISA TOGO'S	On 121718 WESTMINSTER CA REF # 24081628352030035906875	2030035906 10.92-
Dec 20	Debit Purchase - VISA BAGELMANIA COFFE	On 121818 HUNTINGTON B CA REF # 24000978353609201406558	3609201406 10.23-
Dec 20	Debit Purchase 823867	99-CENTS-ONLY #0 HUNTINGTON BCA On 122018 ILK1TERM REF 835420823867	6712201444 19.41-
Dec 20	Debit Purchase - VISA COMPASSION INTER	On 121918 800-336-7676 CO REF # 24493988353083002536 US1	3083002536 38.00-
Dec 20	Debit Purchase - VISA SIX FLAGS MAGIC	On 122018 661-255-4100 CA REF # 24431068354004262062235	4004262062 276.55-

Card 7754 Withdrawals Subtotal \$ 2,912.94-

Total Card Withdrawals \$ 2,912.94-

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Nov 23	Mobile Banking Transfer	To Account 157514543444	\$ 20.00-
Nov 23	Electronic Withdrawal REF=183270064494700N00	To SO CAL GAS 1992052494PAID SCGC 1534090996	111.41-
Nov 26	Electronic Withdrawal REF=183300044737850N00	To TJ MAXX 9500000000ONLINE PMTUSB377145507POS	669.56-
Nov 26	Electronic Withdrawal REF=183300044717060N00	To MACY'S 9500000000ONLINE PMTUSB377145507POS	688.97-
Nov 26	Electronic Withdrawal REF=183300044686810N00	To CAPITAL ONE CARD 9500000000ONLINE PMTUSB377145507POS	3,750.04-
Nov 28	Internet Banking Transfer	To Account 157514543444	25.00-
Dec 10	Mobile Banking Transfer	To Account 157514543444	85.00-
Dec 12	Mobile Banking Transfer	To Account 157514543444	20.00-
Dec 12	START Scheduled Transfer	Transfer 1200009242	100.00-
Dec 13	Internet Banking Transfer	To Account 157508344635	500.00-
Dec 17	Electronic Withdrawal REF=183510082974860N00	To WELLS FARGO CC 9500000000ONLINE PMTUSB377145507POS	2,358.11-
Dec 18	Internet Banking Payment	To Credit Card *****8121	434.69-
Dec 19	Electronic Withdrawal REF=183520159873380N00	To LENDING CLUB F5106057318885963157T1058760941	490.45-
Dec 20	Mobile Banking Transfer	To Account 157514543444	20.00-
Dec 20	Electronic Withdrawal REF=183540086978120N00	To CAPITAL ONE CARD 9500000000ONLINE PMTUSB377145507POS	523.82-

Total Other Withdrawals \$ 9,797.05-

	Total for Statement Period	Total Year to Date
Total Returned Item Fees	\$ 0.00	\$ 0.00
Total Overdraft Fees	\$ 0.00	\$ 36.00
TOTAL	\$ 0.00	\$ 36.00

RESP'T APP 2178

ER 000488



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Nov 22, 2018
through
Dec 20, 2018

Page 5 of 6

U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Checks Presented Conventionally

Check	Date	Ref Number	Amount	Check	Date	Ref Number	Amount
0685	Dec 3	8051718171	1,396.71	0687*	Nov 29	8954405383	5,000.00

* Gap in check sequence

Conventional Checks Paid (2) \$ 6,396.71-

Balance Summary

Date	Ending Balance	Date	Ending Balance	Date	Ending Balance
Nov 23	16,426.05	Dec 5	4,859.08	Dec 13	4,889.32
Nov 26	11,003.75	Dec 6	4,816.97	Dec 14	4,784.44
Nov 27	10,968.38	Dec 7	4,834.98	Dec 17	2,127.88
Nov 28	10,926.23	Dec 10	4,585.67	Dec 18	4,001.93
Nov 29	5,840.16	Dec 11	4,542.97	Dec 19	3,500.56
Dec 3	4,938.10	Dec 12	4,922.97	Dec 20	2,612.55
Dec 4	4,901.52				

Balances only appear for days reflecting change.

RESP'T APP 2179

ER 000489



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTON BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Nov 22, 2018
through
Dec 20, 2018

Page 6 of 6



IMAGES FOR YOUR U.S. BANK SILVER CHECKING ACCOUNT

Member FDIC

Account Number 1-537-5390-4983

ALECIA A KREMIDAS-DRAPER 06-180/212 685
2217 PLACIDA ST. APT 3
HUNTINGTON BCH, CA 92648-2083
DATE Nov 14, 2018
PAY TO THE ORDER OF Skill Craft Body Shop, Inc. \$ 1,396.71
One Thousand Three Hundred and Ninety Six and 71/100
usbank. All of us serving you.
MEMO All sink payment Alecia Draper
⑆121201694⑆ 153753904983⑆0685 85537

0685

Dec 03

1,396.71

* Gap in check sequence

ALECIA A KREMIDAS-DRAPER 06-180/212 687
2217 PLACIDA ST. APT 3
HUNTINGTON BCH, CA 92648-2083
DATE Nov 23, 2018
PAY TO THE ORDER OF Elizabeth Brennan Law Firm \$ 5,000.00
Five Thousand Dollars and 00/100
usbank. All of us serving you.
MEMO Cash # 15-033668 Alecia Draper
⑆121201694⑆ 153753904983⑆0687

0687*

Nov 29

5,000.00

RESP'T APP 2180

ER 000490



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

4004 IMG S X ST01

Uni-Statement

Account Number:

1 537 5390 4983

Statement Period:

Dec 21, 2018

through

Jan 22, 2019

Page 1 of 4



000012323 01 SP 106481885493161 E

ALECIA KREMIDAS-DRAPER

20762 CRESTVIEW LN

HUNTINGTN BCH CA 92646-5929



To Contact U.S. Bank

By Phone:

1-800-US BANKS

(1-800-872-2657)

U.S. Bank accepts Relay Calls

Internet:

usbank.com

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U.S. BANK SILVER CHECKING

U.S. Bank National Association

Member FDIC

Account Number 1-537-5390-4983

Account Summary

Beginning Balance on Dec 21	\$	2,612.55	Number of Days in Statement Period	33
Deposits / Credits		33,836.30	Average Account Balance	\$ 5,794.17
Card Withdrawals		1,198.05-		
Other Withdrawals		1,043.54-		
Checks Paid		33,250.00-		
Ending Balance on Jan 22, 2019	\$	957.26		

Overdraft Protection

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1st Position: U.S. Bank Package Money Market Savings account ending in 6732

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Dec 28	Debit Purchase Ret - VISA BEST BUY MHT 00	On 122718 TUCSON AZ REF # 74399008361295040053 US1	1295040053 \$ 16.30
Dec 28	Wire Credit REF003635 ORG=GEOFFREY DRAPER	BK AMER NYC 181228002731 20762 CRESTVIEW LN	32,500.00
Dec 31	Internet Banking Transfer	From Account 157500494677	600.00

RESP'T APP 2181

ER 000491



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Dec 21, 2018
through
Jan 22, 2019



Page 2 of 4

U.S. BANK SILVER CHECKING

U.S. Bank National Association

(CONTINUED)

Account Number 1-537-5390-4983

Deposits / Credits (continued)

Date	Description of Transaction	Ref Number	Amount
Jan 4	Deposit	9257151916	720.00
Total Deposits / Credits		\$	33,836.30

Card Withdrawals

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Dec 21	Debit Purchase - VISA Amazon.com*M2125	On 122018 Amzn.com/bil WA REF # 24692168354100717841520	4100717841 \$ 33.67-
Dec 24	Debit Purchase - VISA CITY OF NEWPORT	On 122118 949-6443241 CA REF # 24512398355900016311582	5900016311 2.20-
Dec 24	Debit Purchase - VISA GROUPON INC	On 122218 877-788-7858 IL REF # 24692168356100185582240	6100185582 4.99-
Dec 24	Debit Purchase - VISA DISNEY'S PIN TRA	On 122018 ANAHEIM CA REF # 24431068355894355004030	5894355004 10.76-
Dec 24	Debit Purchase - VISA CENTURY THEATRES	On 122218 HUNTINGTN BC CA REF # 24692168357100524620122	7100524620 11.55-
Dec 24	Debit Purchase - VISA FANDANGO.COM	On 122318 FANDANGO.COM CA REF # 24692168357100455363007	7100455363 15.45-
Dec 24	Debit Purchase - VISA WORLD OF DISNEY	On 122018 ANAHEIM CA REF # 24431068355894355004162	5894355004 88.34-
Dec 26	Debit Purchase - VISA 2ND FLOOR FAD	On 122318 HUNTINGTON B CA REF # 24002638358018024955556	8018024955 31.98-
Dec 26	Debit Purchase - VISA THE TOLL ROADS O	On 122518 949-727-4800 CA REF # 24692168359100715054 US1	9100715054 50.00-
Dec 27	ATM Withdrawal	USB N SILVERBELL TUCSON AZ Serial No. 003828164717SUS4U674	100.00-
Jan 2	Debit Purchase - VISA VZWRLSS*APOCC VI	On 010119 800-922-0204 FL REF # 24692169001100268150 US1	1100268150 284.65-
Jan 7	Debit Purchase 626104	WALGREENS STORE HUNTINGTON BCA On 010619 ILNKILNK REF 900701626104	0401061920 11.70-
Jan 7	Debit Purchase 828704	WHOLEFDS HTB 103 HUNTINGTON BCA On 010519 ILNKILNK REF 900522828704	0401051644 15.95-
Jan 8	Debit Purchase - VISA HURRICANES BAR &	On 010619 HUNTINGTON B CA REF # 24013399007000840305274	7000840305 114.56-
Jan 15	Debit Purchase - VISA CITY OF NEWPORT	On 011419 949-6443241 CA REF # 24512399014900018767444	4900018767 1.45-
Jan 16	Debit Purchase - VISA HO SUM BISTRO	On 011419 NEWPORT BEAC CA REF # 24428069015500652614505	5500652614 39.29-
Jan 16	Debit Purchase - VISA 24 Hour Fitness	On 011519 800-4326348 CA REF # 24204299015000299923 US1	5000299923 41.99-
Jan 18	Debit Purchase - VISA FOOD FOR THE HUN	On 011719 480-998-3100 AZ REF # 24765189017030018694343	7030018694 35.00-
Jan 22	Debit Purchase - VISA COMPASSION INTER	On 011919 800-336-7676 CO REF # 24493989019083012715 US1	9083012715 38.00-
Jan 22	Debit Purchase 547441	ARCO #42584 AMPM HUNTINGTON BCA On 012019 MAESTERM REF 547441	38.57-
Jan 22	ATM Withdrawal	US BANK BEACH BO HUNTINGTN BC CA Serial No. 005251165744SUS4T587	100.00-
Jan 22	Debit Purchase 195227	WALLFLOWERS CONS HUNTINGTON BCA On 012119 ILK1TERM REF 902120195227	2701211450 127.95-

Card 7754 Withdrawals Subtotal \$ 1,198.05-

Total Card Withdrawals \$ 1,198.05-

RESP'T APP 2182

ER 000492



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Dec 21, 2018
through
Jan 22, 2019

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U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Dec 24	Electronic Withdrawal REF=183580050610910N00	To MACY'S 9500000000ONLINE PMTUSB377145507POS	\$ 7.32-
Dec 24	Electronic Withdrawal REF=183580051809390N00	To SO CAL GAS 1992052494PAID SCGC 1534090996	125.78-
Dec 28	Wire Transfer Fee	2800003549	20.00-
Jan 4	Electronic Withdrawal REF=190040043940810N00	To WELLS FARGO CC 9500000000ONLINE PMTUSB377145507POS	279.99-
Jan 7	Mobile Banking Transfer	To Account 157514543444	20.00-
Jan 14	START Scheduled Transfer	Transfer 1400008714	100.00-
Jan 22	Electronic Withdrawal REF=190220014819180N00	To LENDING CLUB F5106057318885963157T1062070650	490.45-
Total Other Withdrawals			\$ 1,043.54-

	Total for Statement Period	2019 Total Year to Date	2018 Total Year to Date
Total Returned Item Fees	\$ 0.00	\$ 0.00	\$ 0.00
Total Overdraft Fees	\$ 0.00	\$ 0.00	\$ 36.00
TOTAL	\$ 0.00	\$ 0.00	\$ 36.00

Checks Presented Conventionally

Check	Date	Ref Number	Amount	Check	Date	Ref Number	Amount
0690	Dec 31	8057344011	15,000.00	0693	Jan 17	8951554790	200.00
0691	Dec 31	8057344012	15,000.00	5433*	Dec 21	9254001423	275.00
0692	Jan 8	8356995835	2,500.00	5438*	Jan 8	8355375303	275.00

* Gap in check sequence

Conventional Checks Paid (6) \$ 33,250.00-

Balance Summary

Date	Ending Balance	Date	Ending Balance	Date	Ending Balance
Dec 21	2,303.88	Jan 2	4,667.16	Jan 15	2,068.51
Dec 24	2,037.49	Jan 4	5,107.17	Jan 16	1,987.23
Dec 26	1,955.51	Jan 7	5,059.52	Jan 17	1,787.23
Dec 27	1,855.51	Jan 8	2,169.96	Jan 18	1,752.23
Dec 28	34,351.81	Jan 14	2,069.96	Jan 22	957.26
Dec 31	4,951.81				

Balances only appear for days reflecting change.

RESP'T APP 2183

ER 000493



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Dec 21, 2018
through
Jan 22, 2019

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IMAGES FOR YOUR U.S. BANK SILVER CHECKING ACCOUNT

Member FDIC

Account Number 1-537-5390-4983

ALECIA A KREMIDAS-DRAPER
2217 F. OGDEN ST. APT 3
HUNTINGTON BCH, CA 92646-5923

DATE: Dec 30, 2018

PAY TO THE ORDER OF: Tim Draper

\$15,000.00

Fifteen Thousand dollars and 00/100

USbank All of us serving you.

VOID

ALICIA DRAPER

⑆121201694⑆ 153753904983⑆0690

0690

Dec 31

15,000.00

ALECIA A KREMIDAS-DRAPER
2217 F. OGDEN ST. APT 3
HUNTINGTON BCH, CA 92646-5923

DATE: Jan 15, 2019

PAY TO THE ORDER OF: Sloan Brooks

\$200.00

Two Hundred dollars and 00/100

USbank All of us serving you.

VOID

CAN - Adam ALICIA DRAPER

⑆121201694⑆ 153753904983⑆0693

0693

Jan 17

200.00

ALECIA A KREMIDAS-DRAPER
2217 F. OGDEN ST. APT 3
HUNTINGTON BCH, CA 92646-5923

DATE: Dec 30, 2018

PAY TO THE ORDER OF: Marc Draper

\$15,000.00

Fifteen Thousand dollars and 00/100

USbank All of us serving you.

VOID

ALICIA DRAPER

⑆121201694⑆ 153753904983⑆0691

0691

Dec 31

15,000.00

Account: 498797 PLEASE POST THIS PAYMENT FOR ALL MONTHLY CUSTOMERS \$775.00

PLEASE CREDIT ANY OVERPAYMENTS TO THE CREDIT ADVISORY DEPARTMENT

0000005433

December 19, 2018

PAY TWO HUNDRED SEVENTY FIVE AND 00/100 DOLLARS

\$ 775.00

TO: THE ORDER OF: YOU ARE NOT CASHING THIS CHECK OR DEPOSITING IT IN A BANK OR FINANCIAL INSTITUTION. THIS CHECK HAS BEEN AUTHORIZED BY THE DEPOSITOR.

⑆121201694⑆ 153753904983⑆

5433*

Dec 21

275.00

ALECIA A KREMIDAS-DRAPER
2217 F. OGDEN ST. APT 3
HUNTINGTON BCH, CA 92646-5923

DATE: Dec 30, 2018

PAY TO THE ORDER OF: Marc Draper

\$2,500.00

Two Thousand Five Hundred dollars and 00/100

USbank All of us serving you.

VOID

ALICIA DRAPER

⑆121201694⑆ 153753904983⑆0692

0692

Jan 08

2,500.00

Account: 498797 PLEASE POST THIS PAYMENT FOR ALL MONTHLY CUSTOMERS \$775.00

PLEASE CREDIT ANY OVERPAYMENTS TO THE CREDIT ADVISORY DEPARTMENT

0000005433

January 08, 2019

PAY TWO HUNDRED SEVENTY FIVE AND 00/100 DOLLARS

\$ 775.00

TO: THE ORDER OF: YOU ARE NOT CASHING THIS CHECK OR DEPOSITING IT IN A BANK OR FINANCIAL INSTITUTION. THIS CHECK HAS BEEN AUTHORIZED BY THE DEPOSITOR.

⑆121201694⑆ 153753904983⑆

5438*

Jan 08

275.00

* Gap in check sequence

RESP'T APP 2184

ER 000494



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

4004 IMG S X ST01

Uni-Statement

Account Number:

1 537 5390 4983

Statement Period:

Jan 23, 2019

through

Feb 21, 2019

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000009090 01 SP 106481921985693 E

ALECIA KREMIDAS-DRAPER

20762 CRESTVIEW LN

HUNTINGTN BCH CA 92646-5929



To Contact U.S. Bank

By Phone:

1-800-US BANKS

(1-800-872-2657)

U.S. Bank accepts Relay Calls

Internet:

usbank.com

U.S. BANK SILVER CHECKING

U.S. Bank National Association

Member FDIC

Account Number 1-537-5390-4983

Account Summary

Beginning Balance on Jan 23	\$	957.26	Number of Days in Statement Period	30
Deposits / Credits		2,210.12	Average Account Balance	\$ 882.64
Card Withdrawals		1,275.26-		
Other Withdrawals		1,520.08-		
Checks Paid		232.59-		
Ending Balance on Feb 21, 2019	\$	139.45		

Overdraft Protection

The following account(s) are linked to your checking account for Overdraft Protection. The account(s) are listed in the order that they would be used to transfer funds to your checking account if the available account balance is negative. If you wish to make changes to your Overdraft Protection account order, log in to your account at usbank.com, visit your local U.S. Bank branch or call U.S. Bank 24-Hour Banking at the number listed above.

1st Position: U.S. Bank Package Money Market Savings account ending in 6732

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Jan 28	Mobile Banking Transfer	From Account 157515405437	\$ 1,000.00
Feb 4	Mobile Banking Transfer	From Account 157500494677	525.00
Feb 15	Electronic Deposit	From MOONWOOD COFFEE	685.12
	REF=190450052590190N00	DIR DEP 1822254919	
Total Deposits / Credits			\$ 2,210.12

Card Withdrawals

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Jan 23	Debit Purchase - VISA	On 012219 877-788-7858 IL	\$ 4.99-
	GROUPON INC	REF # 24692169022100233142288	
Jan 23	Debit Purchase	SMART AND FINAL HUNTINGTON BCA	28.15-
	276485	On 012219 MAESTERM REF 276485	
Jan 24	Debit Purchase - VISA	On 012319 HUNTINGTON B CA	9.82-
	YOGURTLAND CA112	REF # 24231689023091472000382	
Jan 24	Debit Purchase - VISA	On 012219 HUNTINGTON B CA	21.65-
	LA CAPILLA RESTA	REF # 24323049023156100009877	
Jan 28	Debit Purchase - VISA	On 012119 HUNTINGTON B CA	15.33-
	WENDY'S 846	REF # 24445009026600084446427	
Jan 28	Debit Purchase - VISA	On 012419 HUNTINGTON B CA	60.00-
	BODY AND SOLE CO	REF # 24071059025627170949532	
Jan 28	ATM Withdrawal	US BANK BROOKHUR HUNTINGTN BC CA	200.00-
		Serial No. 000892160709SUS4U864	
Jan 30	Debit Purchase - VISA	On 012919 LAGUNA NIGUE CA	19.37-
	CORNER BAKERY 02	REF # 24431069030091923000555	
Feb 4	Debit Purchase	CLASSIC CAKE DEC GARDEN GROVECA	54.26-
	527261	On 020219 MAESTERM REF 527261	

RESP'T APP 2185

ER 000495



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Jan 23, 2019
through
Feb 21, 2019



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U.S. BANK SILVER CHECKING

U.S. Bank National Association

(CONTINUED)

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction		Ref Number	Amount
Feb 4	Debit Purchase - VISA VZWRLSS*APOCC VI	On 020119 800-922-0204 FL REF # 24692169032100469220 US1	2100469220	284.73-
Feb 11	Debit Purchase - VISA CARL'S JR 110012	On 020719 SANTA ANA CA REF # 24431059039036000101653	9036000101	9.04-
Feb 11	Debit Purchase - VISA 5982 EL POLLO LO	On 020919 SANTA ANA CA REF # 24013399041001378178263	1001378178	9.65-
Feb 11	Debit Purchase 456476	WAL-MART #2517 SANTA ANA CA On 020919 MAESTERM REF 456476		11.56-
Feb 11	Debit Purchase - VISA STATE OF CALIF D	On 020719 800-7770133 CA REF # 24755429039160394689785	9160394689	243.00-
Feb 14	Debit Purchase - VISA PTICKET.COM-HUNT	On 021319 800-553-4412 CA REF # 24493989045026491470555	5026491470	72.00-
Feb 19	Debit Purchase - VISA 5327 EL POLLO LO	On 021619 SANTA ANA CA REF # 24013399048002236782059	8002236782	15.46-
Feb 19	Debit Purchase 401099	OC GOODWILL #150 SANTA ANA CA On 021619 MAESTERM REF 401099		26.85-
Feb 19	Debit Purchase - VISA FOOD FOR THE HUN	On 021719 480-998-3100 AZ REF # 24765189048030034173598	8030034173	35.00-
Feb 19	Debit Purchase - VISA SEA MIST MEDICAL	On 021419 HUNTINGTON B CA REF # 24632699046500609047733	6500609047	36.00-
Feb 19	Debit Purchase - VISA 24 Hour Fitness	On 021519 800-4326348 CA REF # 24204299046000377240 US1	6000377240	41.99-
Feb 20	Debit Purchase - VISA COMPASSION INTER	On 021919 800-336-7676 CO REF # 24493989050083030117 US1	0083030117	38.00-
Feb 21	Debit Purchase - VISA 5982 EL POLLO LO	On 021919 SANTA ANA CA REF # 24013399051002638167309	1002638167	10.41-
Feb 21	Debit Purchase - VISA SEA MIST MEDICAL	On 021919 HUNTINGTON B CA REF # 24632699051500543556445	1500543556	28.00-
Card 7754 Withdrawals Subtotal				\$ 1,275.26-
Total Card Withdrawals				\$ 1,275.26-

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Jan 23	Electronic Withdrawal REF=190230071852100N00	To CAPITAL ONE CARD 9500000000ONLINE PMTUSB377145507POS	\$ 126.29-
Jan 23	Electronic Withdrawal REF=190220126434150N00	To SO CAL GAS 1992052494PAID SCGC 1534090996	206.99-
Jan 29	Mobile Banking Transfer	To Account 157514543444	65.00-
Feb 7	Mobile Banking Transfer	To Account 157514543444	30.00-
Feb 11	Electronic Withdrawal REF=190420025516270N00	To WELLS FARGO CC 9500000000ONLINE PMTUSB377145507POS	159.99-
Feb 12	Mobile Banking Transfer	To Account 157514543444	75.00-
Feb 12	START Scheduled Transfer	Transfer 1200008898	100.00-
Feb 14	Mobile Banking Transfer	To Account 157514543444	35.00-
Feb 15	Mobile Banking Transfer	To Account 157514543444	10.00-
Feb 19	Mobile Banking Transfer	To Account 157514543444	25.00-
Feb 19	Electronic Withdrawal REF=190500082076620N00	To LENDING CLUB F5106057318885963157T1065458990	490.45-
Feb 21	Monthly Maintenance Fee		6.95-

RESP'T APP 2186

ER 000496



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Jan 23, 2019
through
Feb 21, 2019

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U.S. BANK SILVER CHECKING

U.S. Bank National Association

(CONTINUED)

Account Number 1-537-5390-4983

Other Withdrawals (continued)

Date	Description of Transaction	Ref Number	Amount
Feb 21	Electronic Withdrawal REF=190520073708510N00	To SO CAL GAS 1992052494PAID SCGC 1534090996	189.41-
Total Other Withdrawals			\$ 1,520.08-

Checks Presented Conventionally

Check	Date	Ref Number	Amount
5440	Jan 31	8954027143	232.59

Conventional Checks Paid (1) \$ 232.59-

Balance Summary

Date	Ending Balance	Date	Ending Balance	Date	Ending Balance
Jan 23	590.84	Jan 31	967.08	Feb 14	407.85
Jan 24	559.37	Feb 4	1,153.09	Feb 15	1,082.97
Jan 28	1,284.04	Feb 7	1,123.09	Feb 19	412.22
Jan 29	1,219.04	Feb 11	689.85	Feb 20	374.22
Jan 30	1,199.67	Feb 12	514.85	Feb 21	139.45

Balances only appear for days reflecting change.

RESP'T APP 2187

ER 000497



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Jan 23, 2019
through
Feb 21, 2019



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IMAGES FOR YOUR U.S. BANK SILVER CHECKING ACCOUNT

Member FDIC

Account Number 1-537-5390-4983

ACCOUNT: 489797-01	PLEASE PRINT THE NAME OF THE PERSONAL CHECK WRITER	\$232.59
Pay to the order of: ALECIA KREMIDAS-DRAPER		
20762 CRESTVIEW LN		
HUNTINGTON BEACH CA 92646-5929		
DATE: JAN 31, 2019		
AMOUNT: TWO HUNDRED THIRTY TWO AND 59/100 DOLLARS		
\$ 232.59		
MICR LINE: ⑆000000⑆ 000000000000 ⑆53753904983⑆		

5440

Jan 31

232.59

RESP'T APP 2188

ER 000498



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

4004 IMG S X ST01

Uni-Statement

Account Number:

1 537 5390 4983

Statement Period:

Feb 22, 2019

through

Mar 20, 2019

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000013999 01 SP 106481954697156 E

ALECIA KREMIDAS-DRAPER

20762 CRESTVIEW LN

HUNTINGTN BCH CA 92646-5929



To Contact U.S. Bank

By Phone:

1-800-US BANKS

(1-800-872-2657)

U.S. Bank accepts Relay Calls

Internet:

usbank.com

INFORMATION YOU SHOULD KNOW

Thank you for choosing U.S. Bank. We're committed to keeping you up-to-date on your account(s) and would like to make you aware of several updates to the "Consumer Pricing Information" brochure, effective May 13, 2019. You may pick up a copy at your local branch, view a copy at usbank.com, or call 800.USBANKS (800.872.2657) for a copy beginning May 13.

The main updates include:

- New Platinum Checking Package benefit regarding Overdraft or Extended Overdraft fees
- Updated benefit for Platinum Checking Package owners with a self-directed brokerage account available through our affiliate U.S. Bancorp Investments*
- New benefit for Gold Checking Package owners with a self-directed brokerage account available through our affiliate U.S. Bancorp Investments*
- Corrected investment tiers of the Elite Money Market account
- New disclosure in the effective date of check order discount benefit when switching existing checking product options

If you have any questions, our bankers are here to help at your local branch. You can also call us at U.S. Bank 24-Hour Banking at 800.USBANKS (872.2657). We accept relay calls.

Investment and Insurance products and services including annuities are:

**NOT A DEPOSIT • NOT FDIC INSURED • MAY LOSE VALUE • NOT BANK GUARANTEED •
NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY**

* **For U.S. Bancorp Investments:** Investment products and services are available through U.S. Bancorp Investments, the marketing name for U.S. Bancorp Investments, Inc., member FINRA and SIPC, an investment adviser and a brokerage subsidiary of U.S. Bancorp and affiliate of U.S. Bank.

For U.S. Bank: U.S. Bank is not responsible for and does not guarantee the products, services, or performance of U.S. Bancorp Investments. Deposit products offered by U.S. Bank National Association. Member FDIC.

U.S. BANK SILVER CHECKING

Member FDIC

U.S. Bank National Association

Account Number 1-537-5390-4983

Account Summary

Beginning Balance on Feb 22	\$	139.45	Number of Days in Statement Period	27
Deposits / Credits		3,349.16	Average Account Balance	\$ 643.30
Card Withdrawals		631.63-		
Other Withdrawals		1,912.91-		
Checks Paid		886.59-		
Ending Balance on Mar 20, 2019	\$	57.48		

Overdraft Protection

The following account(s) are linked to your checking account for Overdraft Protection. The account(s) are listed in the order that they would be used to transfer funds to your checking account if the available account balance is negative. If you wish to make changes to your Overdraft Protection account order; log in to your account at usbank.com, visit your local U.S. Bank branch or call U.S. Bank 24-Hour Banking at the number listed above.

1st Position: U.S. Bank Package Money Market Savings account ending in 6732

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Feb 25	Deposit	8058844016	\$ 800.00

RESP'T APP 2189

ER 000499



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Feb 22, 2019
through
Mar 20, 2019

Page 2 of 4

U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Deposits / Credits (continued)

Date	Description of Transaction	Ref Number	Amount
Mar 1	Electronic Deposit REF=190590140398600N00	From MOONWOOD COFFEE DIR DEP 1822254919	685.13
Mar 4	Mobile Banking Transfer	From Account 157500494677	550.00
Mar 5	Deposit	8358925716	700.00
Mar 12	Transfer Deposit (Branch)	From 157514543444	0.03
Mar 12	Deposit	8358208502	130.00
Mar 14	Internet Banking Transfer	From Account 157515405437	234.00
Mar 18	Internet Banking Transfer	From Account 253752156732	200.00
Mar 19	Overdraft Protection	Transfer From Account Ending in 6732	50.00
Total Deposits / Credits			\$ 3,349.16

Card Withdrawals

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Feb 25	Debit Purchase - VISA GROUPON INC	On 022219 877-788-7858 IL REF # 24692169053100950990630	3100950990 \$ 4.99-
Feb 25	Debit Purchase - VISA KFC D011002	On 022419 SANTA ANA CA REF # 24431069056091250000128	6091250000 7.53-
Feb 25	Debit Purchase - VISA 5982 EL POLLO LO	On 022419 SANTA ANA CA REF # 24013399055003182619709	5003182619 8.48-
Feb 25	Debit Purchase 145744	ARCO #42507 SANTA ANA CA On 022419 MAESTERM REF 145744	8854287627 13.53-
Feb 28	Debit Purchase - VISA SQ *MOONWOOD COF	On 022719 HUNTINGTN BC CA REF # 24492159058854287627384	8741343568 3.00-
Feb 28	Debit Purchase - VISA SQ *PURO NUEZ	On 022719 HERMOSA BEAC CA REF # 24492159058741343568308	8100813957 6.00-
Feb 28	Debit Purchase - VISA SQ *ARIEH HADDAD	On 022719 Canoga Park CA REF # 24692169058100813957201	9400380001 9.50-
Feb 28	Debit Purchase - VISA J M PRODUCE	On 022719 SANTA MARIA CA REF # 24431069059400380001624	0000030664 12.50-
Mar 4	Debit Purchase - VISA 3614 EL POLLO LO	On 030119 HUNTINGTON B CA REF # 24013399060000030664112	0100791003 10.74-
Mar 4	Debit Purchase - VISA VZWRLSS*APOCC VI	On 030119 800-922-0204 FL REF # 24692169060100791003 US1	3000479157 284.73-
Mar 5	Debit Purchase - VISA 3442 EL POLLO LO	On 030319 LAKE FOREST CA REF # 24013399063000479157849	8103080225 10.01-
Mar 8	Debit Purchase 939481	ALBERTSONS STORE FOUNTAIN VALCA On 030819 ILNKILNK REF 906708939481	6000840364 7.99-
Mar 8	Debit Purchase - VISA 5399 EL POLLO LO	On 030619 HUNTINGTON B CA REF # 24013399066000840364642	8100910689 8.16-
Mar 11	Debit Purchase - VISA ISLANDS REST 005	On 030819 FOUNTAIN VAL CA REF # 24692169068100910689903	7000208913 17.42-
Mar 11	Debit Purchase - VISA 24 Hour Fitness	On 030819 800-4326348 CA REF # 24204299067000208913 US1	0900014454 49.99-
Mar 12	Debit Purchase - VISA CITY OF NEWPORT	On 031019 949-6443241 CA REF # 24512399070900014454089	1100746573 1.45-
Mar 13	Debit Purchase - VISA THE TOLL ROADS O	On 031219 949-727-4800 CA REF # 24692169071100746573 US1	DOLLAR TR 18595 HUNTINGTON BCA On 031819 MAESTERM REF 126962
Mar 18	Debit Purchase 126962	On 031719 480-998-3100 AZ REF # 24765189076030038429835	6030038429 10.62-
Mar 18	Debit Purchase - VISA FOOD FOR THE HUN	On 031519 800-4326348 CA REF # 24204299074000318953 US1	4000318953 35.00-
Mar 18	Debit Purchase - VISA 24 Hour Fitness	On 031519 800-4326348 CA REF # 24204299074000318953 US1	4000318953 41.99-

RESP'T APP 2190

ER 000500



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Feb 22, 2019
through
Mar 20, 2019

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U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Mar 20	Debit Purchase - VISA COMPASSION INTER	On 031919 800-336-7676 CO REF # 24493989078083028953 US1	8083028953 38.00-

Card 7754 Withdrawals Subtotal \$ 631.63-

Total Card Withdrawals \$ 631.63-

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Feb 25	Mobile Banking Transfer	To Account 157514543444	\$ 30.00-
Feb 28	Mobile Banking Transfer	To Account 157514543444	20.00-
Mar 4	Internet Banking Transfer	To Account 157514543444	20.00-
Mar 5	Mobile Banking Transfer	To Account 157515405437	250.00-
Mar 6	Mobile Banking Transfer	To Account 157514543444	30.00-
Mar 6	Electronic Withdrawal REF=190640138194380N00	To MACY'S 9500000000ONLINE PMTUSB377145507POS	190.44-
Mar 6	Electronic Withdrawal REF=190640138215100N00	To WELLS FARGO CC 9500000000ONLINE PMTUSB377145507POS	279.99-
Mar 6	Electronic Withdrawal REF=190640138170780N00	To CAPITAL ONE CARD 9500000000ONLINE PMTUSB377145507POS	495.08-
Mar 12	START Scheduled Transfer	Transfer 1200009006	100.00-
Mar 19	Electronic Withdrawal REF=190770163892290N00	To LENDING CLUB F5106057318885963157T1069286048	490.45-
Mar 20	Monthly Maintenance Fee		6.95-

Total Other Withdrawals \$ 1,912.91-

Checks Presented Conventionally

Check	Date	Ref Number	Amount	Check	Date	Ref Number	Amount
0695	Mar 1	9254144310	150.00	5442*	Mar 5	8358186671	270.00
0697*	Mar 11	8053317529	184.00	5443	Mar 5	8358186670	232.59
0698	Mar 11	8053317530	50.00				

* Gap in check sequence

Conventional Checks Paid (5) \$ 886.59-

Balance Summary

Date	Ending Balance	Date	Ending Balance	Date	Ending Balance
Feb 25	874.92	Mar 6	535.47	Mar 14	430.49
Feb 28	823.92	Mar 8	519.32	Mar 18	542.88
Mar 1	1,359.05	Mar 11	217.91	Mar 19	102.43
Mar 4	1,593.58	Mar 12	246.49	Mar 20	57.48
Mar 5	1,530.98	Mar 13	196.49		

Balances only appear for days reflecting change.

RESP'T APP 2191

ER 000501



ALECIA KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Feb 22, 2019
through
Mar 20, 2019

Page 4 of 4



IMAGES FOR YOUR U.S. BANK SILVER CHECKING ACCOUNT

Member FDIC
Account Number 1-537-5390-4983

ALECIA A KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTON BEACH CA 92646-5929
695
Date: Feb 20, 2019
Pay to the order of: Karing Cleaning Service \$ 150.00
One Hundred and Fifty dollars and 00/100
USbank
ALECIA A KREMIDAS-DRAPER
1537539049830695

0695

Mar 01

150.00

Account: 488787
PLEASE PRINT THE PAYEE'S NAME AND ADDRESS
Pay to the order of: Karing Cleaning Service \$ 270.00
Two Hundred and Seventy and 00/100
USbank
ALECIA A KREMIDAS-DRAPER
15375390498305442
March 05, 2019

5442*

Mar 05

270.00

ALECIA A KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTON BEACH CA 92646-5929
697
Date: Mar 11, 2019
Pay to the order of: L.A. County \$ 184.00
One Hundred and Eighty Four dollars and 00/100
USbank
ALECIA A KREMIDAS-DRAPER
1537539049830697
Ind 4887

0697*

Mar 11

184.00

Account: 488787-01
PLEASE PRINT THE PAYEE'S NAME AND ADDRESS
Pay to the order of: L.A. County \$ 232.59
Two Hundred and Thirty Two and 59/100
USbank
ALECIA A KREMIDAS-DRAPER
15375390498305443
March 05, 2019

5443

Mar 05

232.59

ALECIA A KREMIDAS-DRAPER
20762 CRESTVIEW LN
HUNTINGTON BEACH CA 92646-5929
698
Date: Mar 11, 2019
Pay to the order of: L.A. County \$ 50.00
Fifty dollars and 00/100
USbank
ALECIA A KREMIDAS-DRAPER
1537539049830698
Ind 4889

0698

Mar 11

50.00

* Gap in check sequence

RESP'T APP 2192

ER 000502



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

4004 IMG S X ST01

Uni-Statement

Account Number:

1 537 5390 4983

Statement Period:

Mar 21, 2019

through

Apr 18, 2019

Page 1 of 5



000013106 01 SP 106481985758480 E

ALECIA KREMIDAS-DRAPER

GEOFFREY M DRAPER

20762 CRESTVIEW LN

HUNTINGTN BCH CA 92646-5929



To Contact U.S. Bank

By Phone:

1-800-US BANKS

(1-800-872-2657)

U.S. Bank accepts Relay Calls

Internet:

usbank.com

INFORMATION YOU SHOULD KNOW

Thank you for choosing U.S. Bank. We're committed to keeping you up-to-date on your account(s) and would like to make you aware of several updates to the "Consumer Pricing Information" brochure, effective May 13, 2019. You may pick up a copy at your local branch, view a copy at usbank.com, or call 800.USBANKS (800.872.2657) for a copy beginning May 13.

The main updates include:

- New Platinum Checking Package benefit regarding Overdraft or Extended Overdraft fees
- Updated benefit for Platinum Checking Package owners with a self-directed brokerage account available through our affiliate U.S. Bancorp Investments*
- New benefit for Gold Checking Package owners with a self-directed brokerage account available through our affiliate U.S. Bancorp Investments*
- Corrected investment tiers of the Elite Money Market account
- New disclosure in the effective date of check order discount benefit when switching existing checking product options

If you have any questions, our bankers are here to help at your local branch. You can also call us at U.S. Bank 24-Hour Banking at 800.USBANKS (872.2657). We accept relay calls.

Investment and Insurance products and services including annuities are:

**NOT A DEPOSIT • NOT FDIC INSURED • MAY LOSE VALUE • NOT BANK GUARANTEED •
NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY**

* For U.S. Bancorp Investments: Investment products and services are available through U.S. Bancorp Investments, the marketing name for U.S. Bancorp Investments, Inc., member FINRA and SIPC, an investment adviser and a brokerage subsidiary of U.S. Bancorp and affiliate of U.S. Bank.

For U.S. Bank: U.S. Bank is not responsible for and does not guarantee the products, services, or performance of U.S. Bancorp Investments. Deposit products offered by U.S. Bank National Association. Member FDIC.

U.S. BANK SILVER CHECKING

U.S. Bank National Association

Member FDIC

Account Number 1-537-5390-4983

Account Summary

Beginning Balance on Mar 21	\$	57.48	Number of Days in Statement Period	29
Deposits / Credits		22,185.12	Average Account Balance	\$ 4,496.29
Card Withdrawals		1,414.38-		
Other Withdrawals		8,103.87-		
Checks Paid		10,267.64-		
Ending Balance on Apr 18, 2019	\$	2,456.71		

Overdraft Protection

The following account(s) are linked to your checking account for Overdraft Protection. The account(s) are listed in the order that they would be used to transfer funds to your checking account if the available account balance is negative. If you wish to make changes to your Overdraft Protection account order; log in to your account at usbank.com, visit your local U.S. Bank branch or call U.S. Bank 24-Hour Banking at the number listed above.

1st Position: U.S. Bank Package Money Market Savings account ending in 6732

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Mar 22	Overdraft Protection	2200000094	\$ 200.00
	Transfer From Account		
	Ending in 6732		

RESPT APP 2193

ER 000503



ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Mar 21, 2019
through
Apr 18, 2019



Page 2 of 5

U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Deposits / Credits (continued)

Date	Description of Transaction	Ref Number	Amount
Mar 25	Overdraft Protection	Transfer From Account Ending in 6732	50.00
Mar 26	Deposit	8357701222	700.00
Mar 29	Electronic Deposit REF=190880051307610N00	From MOONWOOD COFFEE DIR DEP 1822254919	685.12
Apr 1	Loan/Line Deposit	From Account 3001225106	20,000.00
Apr 2	Internet Banking Transfer	From Account 157500494677	550.00
Total Deposits / Credits			\$ 22,185.12

Card Withdrawals

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Mar 22	Debit Purchase - VISA GROUPON INC	On 032119 GROUPON.COM IL REF # 24692169080100109939303	\$ 21.43-
Mar 25	Debit Purchase - VISA GROUPON INC	On 032219 877-788-7858 IL REF # 24692169081100732776832	4.99-
Mar 27	Debit Purchase - VISA OC PARKING CIVIC	On 032619 SANTA ANA CA REF # 24493989086091265011050	1.00-
Mar 27	Debit Purchase - VISA OC PARKING CIVIC	On 032619 SANTA ANA CA REF # 24493989086091265010557	8.00-
Mar 29	Debit Purchase - VISA BAGELMANIA COFFE	On 032819 HUNTINGTON B CA REF # 24000979087231301317063	11.77-
Apr 1	Debit Purchase 257085	SHELL Service St FOUNTAIN VALCA On 040119 ILK1TERM REF 909101257085	8.51-
Apr 1	Debit Purchase - VISA PANERA BREAD #20	On 033119 IRVINE CA REF # 24231689091091003238847	15.00-
Apr 1	Debit Purchase 626941	TARGET T- 9882 A Huntington BCA On 040119 MAESTERM REF 626941 You Requested \$10 In Cash Back	17.18-
Apr 2	Debit Purchase - VISA TSI-SHOPPER INC	On 040119 800-429-4900 CA REF # 24323009091254432010027	34.32-
Apr 2	Debit Purchase - VISA VZWRLSS*APOCC VI	On 040119 800-922-0204 FL REF # 24692169091100193989 US1	284.81-
Apr 3	Debit Purchase - VISA EUROPEAN WAX CEN	On 040119 HUNTINGTON B CA REF # 24632699092500609202745	7.00-
Apr 3	Debit Purchase - VISA CORNER BAKERY 02	On 040219 LAGUNA NIGUE CA REF # 24431069093091927000654	20.45-
Apr 3	Debit Purchase 526605	HB FUELS INC HUNTINGTON BCA On 040219 MAESTERM REF 526605	47.59-
Apr 5	Debit Purchase - VISA SQ *DANIELLE IDR	On 040419 LAGUNA NIGUE CA REF # 24492159094855454000509	201.25-
Apr 8	Debit Purchase - VISA CHEVRON 0092348	On 040719 BOISE ID REF # 24692169097100033634351	6.23-
Apr 8	Debit Purchase - VISA JACK IN THE BOX	On 040419 SANTA ANA CA REF # 24692169095100845573336	7.96-
Apr 8	Debit Purchase - VISA 10 BARREL BREWIN	On 040519 BOISE ID REF # 24275399097900013870877	32.50-
Apr 8	Debit Purchase - VISA REGAL CINEMAS BO	On 040619 BOISE ID REF # 24755429097170972034485	37.56-
Apr 8	Debit Purchase 951547	CHEVRON/G&M OIL HUNTINGTON BCA On 040819 ILK1TERM REF 909815951547	48.92-
Apr 8	Debit Purchase - VISA BARRIO CAFE T4 S	On 040519 PHOENIX AZ REF # 24692169096100398412048	60.23-
Apr 9	Debit Purchase - VISA BOISE AIRPORT	On 040719 BOISE ID REF # 2443106909879651897953	12.23-

RESP'T APP 2194

ER 000504



ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Mar 21, 2019
through
Apr 18, 2019

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U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Apr 9	Debit Purchase - VISA PROGENY PSYCHIAT	On 040819 IRVINE CA REF # 24692169099100935657730	9100935657 35.00-
Apr 10	Debit Purchase 108428	SMART AND FINAL SANTA ANA CA On 041019 MAESTERM REF 108428	7.08-
Apr 11	Debit Purchase - VISA STARBUCKS STORE	On 041019 BLYTHE CA REF # 24692169100100830084433	0100830084 13.65-
Apr 12	Debit Purchase - VISA 3450 EL POLLO LO	On 041019 ANAHEIM CA REF # 24013399101001417577621	1001417577 7.19-
Apr 12	Debit Purchase - VISA BEAUTY BY TIFINI	On 041119 HUNTINGTON B CA REF # 24692169102100628934078	2100628934 36.00-
Apr 12	Debit Purchase 882989	VONS HUNTINGTON BCA On 041119 ILNKILNK REF 910115882989	8904111014 38.69-
Apr 15	Debit Purchase - VISA CHICK-FIL-A #019	On 041319 IRVINE CA REF # 24427339104710016177277	4710016177 28.80-
Apr 16	Debit Purchase - VISA 24 Hour Fitness	On 041519 800-4326348 CA REF # 24204299105260505323 US1	5260505323 41.99-
Apr 17	Debit Purchase - VISA SOUTHWESTAIR*INF	On 041519 DALLAS TX REF # 24692169106100288771014	6100288771 6.00-
Apr 17	Debit Purchase - VISA SQ *DISNEY PINS/	On 041619 UPLAND CA REF # 24492159106854306823198	6854306823 8.00-
Apr 17	Debit Purchase - VISA GRAND CANYON UNI	On 041619 800-800-9776 AZ REF # 24761979106286888843879	6286888843 50.00-
Apr 17	Debit Purchase - VISA COASTLINE AUTO C	On 041619 714-8421596 CA REF # 24269759106900017100018	6900017100 70.34-
Apr 18	Debit Purchase - VISA CITY OF HB BEACH	On 041719 HUNTINGTN BC CA REF # 24755429107281070709890	7281070709 4.00-
Apr 18	Debit Purchase 254050	OC GOODWILL #150 SANTA ANA CA On 041719 MAESTERM REF 254050	8.48-
Apr 18	Debit Purchase - VISA KFC D011002	On 041719 SANTA ANA CA REF # 24431069108091259000028	8091259000 9.37-
Apr 18	Debit Purchase - VISA FOOD FOR THE HUN	On 041719 480-998-3100 AZ REF # 24765189107030019858096	7030019858 35.00-
Apr 18	Debit Purchase - VISA FRED'S MEXICAN C	On 041619 HUNTINGTON B CA REF # 24801979107286988902295	7286988902 125.86-

Card 7754 Withdrawals Subtotal \$ 1,414.38-

Total Card Withdrawals \$ 1,414.38-

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Mar 22	Electronic Withdrawal REF=190810060216980N00	To SO CAL GAS 1992052494PAID SCGC 1534090996	\$ 213.35-
Apr 3	Electronic Withdrawal REF=190920165282090N00	To MACY'S 9500000000ONLINE PMTUSB377145507POS	3.63-
Apr 3	Electronic Withdrawal REF=190920165305480N00	To WELLS FARGO CC 9500000000ONLINE PMTUSB377145507POS	279.99-
Apr 3	Electronic Withdrawal REF=190920165255640N00	To CAPITAL ONE CARD 9500000000ONLINE PMTUSB377145507POS	619.93-
Apr 3	Electronic Withdrawal REF=190920158431100N00	To LENDING CLUB F5106057318885963157T1070734901	6,878.97-
Apr 8	Check Printing Charge		8.00-

RESP'T APP 2195

ER 000505



ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983

Statement Period:
Mar 21, 2019
through
Apr 18, 2019



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U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Other Withdrawals (continued)

Date	Description of Transaction	Ref Number	Amount
Apr 12	Transfer To Account 253752156732	1200008705	100.00-
Total Other Withdrawals			\$ 8,103.87-

Checks Presented Conventionally

Check	Date	Ref Number	Amount	Check	Date	Ref Number	Amount
0696	Mar 25	8056922582	65.00	0703*	Apr 18	8954304322	25.00
0699*	Mar 28	8954910885	50.00	5448*	Apr 9	8355259560	270.00
0700	Apr 3	8655232270	5,000.00	5449	Apr 9	8355259561	4,857.64

* Gap in check sequence

Conventional Checks Paid (6) \$ 10,267.64-

Balance Summary

Date	Ending Balance	Date	Ending Balance	Date	Ending Balance
Mar 22	22.70	Apr 2	21,507.24	Apr 11	3,051.43
Mar 25	2.71	Apr 3	8,649.68	Apr 12	2,869.55
Mar 26	702.71	Apr 5	8,448.43	Apr 15	2,840.75
Mar 27	693.71	Apr 8	8,247.03	Apr 16	2,798.76
Mar 28	643.71	Apr 9	3,072.16	Apr 17	2,664.42
Mar 29	1,317.06	Apr 10	3,065.08	Apr 18	2,456.71
Apr 1	21,276.37				

Balances only appear for days reflecting change.

RESP'T APP 2196

ER 000506



ALICIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTON BCH CA 92646-5929

RESP'T APP 2197

Unit-Statement
Account Number: 1 537 5390 4983
Statement Period: Mar 21, 2019 through Apr 18, 2019
Page 5 of 5

IMAGES FOR YOUR U.S. BANK SILVER CHECKING ACCOUNT

Member FDIC
Account Number 1-537-5390-4983

ALICIA KREMIDAS-DRAPER
2217 FLORENCE ST. APT 3
HUNTINGTON BCH, CA 92646-5929
MEMBERSHIP NO. 15375390498300596
DATE OF THE CHECK: 3/25/19
PAY TO THE ORDER OF: CLAUDE THOMAS
\$500.00
Fifty Hundred and 00/100
usbank. Add \$0.00 to your account
New York, NY
15375390498300596
3/25/19

0696

Mar 25

65.00

ALICIA KREMIDAS-DRAPER
2217 FLORENCE ST. APT 3
HUNTINGTON BCH, CA 92646-5929
MEMBERSHIP NO. 15375390498300703
DATE OF THE CHECK: 4/15/19
PAY TO THE ORDER OF: THE BANK OF CALIFORNIA
\$500.00
Five Hundred and 00/100
usbank. Add \$0.00 to your account
New York, NY
15375390498300703
4/15/19

0703

Apr 18

25.00

ALICIA KREMIDAS-DRAPER
2217 FLORENCE ST. APT 3
HUNTINGTON BCH, CA 92646-5929
MEMBERSHIP NO. 15375390498300699
DATE OF THE CHECK: 3/28/19
PAY TO THE ORDER OF: THE BANK OF CALIFORNIA
\$500.00
Five Hundred and 00/100
usbank. Add \$0.00 to your account
New York, NY
15375390498300699
3/28/19

0699

Mar 28

50.00

ALICIA KREMIDAS-DRAPER
2217 FLORENCE ST. APT 3
HUNTINGTON BCH, CA 92646-5929
MEMBERSHIP NO. 15375390498300548
DATE OF THE CHECK: 4/05/19
PAY TO THE ORDER OF: THE BANK OF CALIFORNIA
\$270.00
Two Hundred and 70/100
usbank. Add \$0.00 to your account
New York, NY
15375390498300548
4/05/19

5448

Apr 09

270.00

ALICIA KREMIDAS-DRAPER
2217 FLORENCE ST. APT 3
HUNTINGTON BCH, CA 92646-5929
MEMBERSHIP NO. 15375390498300700
DATE OF THE CHECK: 4/03/19
PAY TO THE ORDER OF: THE BANK OF CALIFORNIA
\$500.00
Five Hundred and 00/100
usbank. Add \$0.00 to your account
New York, NY
15375390498300700
4/03/19

0700

Apr 03

5,000.00

ALICIA KREMIDAS-DRAPER
2217 FLORENCE ST. APT 3
HUNTINGTON BCH, CA 92646-5929
MEMBERSHIP NO. 15375390498300549
DATE OF THE CHECK: 4/09/19
PAY TO THE ORDER OF: THE BANK OF CALIFORNIA
\$4,857.64
Four Thousand Eight Hundred and 57/100
usbank. Add \$0.00 to your account
New York, NY
15375390498300549
4/09/19

5449

Apr 09

4,857.64

* Gap in check sequence



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

4004 IMG S X ST01

Uni-Statement

Account Number:

1 537 5390 4983

Statement Period:

Apr 19, 2019

through

May 20, 2019

Page 1 of 5



000012863 01 SP 000638079787244 E

ALECIA KREMIDAS-DRAPER

GEOFFREY M DRAPER

20762 CRESTVIEW LN

HUNTINGTN BCH CA 92646-5929



To Contact U.S. Bank

By Phone:

1-800-US BANKS

(1-800-872-2657)

U.S. Bank accepts Relay Calls

Internet:

usbank.com

U.S. BANK SILVER CHECKING

Member FDIC

U.S. Bank National Association

Account Number 1-537-5390-4983

Account Summary

Beginning Balance on Apr 19	\$	2,456.71	Number of Days in Statement Period	32
Deposits / Credits		16,990.25	Average Account Balance	\$ 3,345.38
Card Withdrawals		2,075.74-		
Other Withdrawals		11,866.73-		
Checks Paid		5,310.00-		
Ending Balance on May 20, 2019	\$	194.49		

Overdraft Protection

The following account(s) are linked to your checking account for Overdraft Protection. The account(s) are listed in the order that they would be used to transfer funds to your checking account if the available account balance is negative. If you wish to make changes to your Overdraft Protection account order, log in to your account at usbank.com, visit your local U.S. Bank branch or call U.S. Bank 24-Hour Banking at the number listed above.

1st Position: U.S. Bank Package Money Market Savings account ending in 6732

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Apr 26	Electronic Deposit REF=191160073726020N00	From MOONWOOD COFFEE DIR DEP 1822254919	\$ 685.13
Apr 30	Deposit	8357972323	70.00
May 1	Internet Banking Transfer	From Account 157500494677	550.00
May 3	Loan/Line Deposit	From Account 3001225106	15,000.00
May 10	Electronic Deposit REF=191290135672460N00	From MOONWOOD COFFEE DIR DEP 1822254919	685.12
Total Deposits / Credits			\$ 16,990.25

Card Withdrawals

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Apr 19	Debit Purchase - VISA BAGELMANIA COFFE	On 041819 HUNTINGTON B CA REF # 24000979108363701391698	\$ 21.20-
Apr 19	Debit Purchase - VISA SCHOOL RECORD/TR	On 041819 855-4651458 NC REF # 24180299108900012275014	60.00-
Apr 19	Debit Purchase - VISA SQ *GOSQ.COM LIS	On 041819 MISSION VIEJ CA REF # 24492159108740212654108	97.75-
Apr 22	Debit Purchase - VISA SOUTHWESTAIR*INF	On 041819 DALLAS TX REF # 24692169109100106828878	6.00-
Apr 22	Debit Purchase - VISA STARBUCKS STORE	On 041819 LAGUNA NIGUE CA REF # 24692169109100170773695	12.90-
Apr 22	Debit Purchase - VISA JACK IN THE BOX	On 042019 SANTA ANA CA REF # 24692169111100344104146	13.94-
Apr 22	Debit Purchase - VISA COMPASSION INTER	On 041919 800-336-7676 CO REF # 24493989109083013225 US1	38.00-
Apr 23	Debit Purchase - VISA Groupon INC	On 042219 877-788-7858 IL REF # 24692169112100969607638	4.99-

RESP'T APP 2198

ER 000508



ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:
1 537 5390 4983
Statement Period:
Apr 19, 2019
through
May 20, 2019



Page 2 of 5

U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
Apr 23	Debit Purchase 939358 WALGREENS STORE HUNTINGTON BCA On 042319 ILK1TERM REF 911305939358	5804230058	7.32-
Apr 23	Debit Purchase 540156 WALGREENS STORE HUNTINGTON BCA On 042319 ILNKILNK REF 911306540156	5604230108	27.11-
Apr 23	Debit Purchase - VISA FORTUNE COOKIES On 042119 FOUNTAIN VAL CA REF # 24275479112387801124207	2387801124	43.18-
Apr 23	Debit Purchase - VISA THE TOLL ROADS O On 042219 949-727-4800 CA REF # 24692169112100910969 US1	2100910969	50.00-
Apr 23	Debit Purchase - VISA PTIMETROCYCLE PE On 042219 855-733-5872 CA REF # 24492159112717381827545	2717381827	154.23-
Apr 24	Debit Purchase - VISA HOAG HOSP DOLPHI On 042319 NEWPORT BEAC CA REF # 24692169113100272613736	3100272613	2.00-
Apr 24	Debit Purchase - VISA HOAG HOSP DOLPHI On 042319 NEWPORT BEAC CA REF # 24692169113100272613728	3100272613	4.00-
Apr 24	Debit Purchase - VISA HHN E HOAG NB On 042219 NEWPORT BEAC CA REF # 24755429113161133146508	3161133146	250.00-
Apr 25	Debit Purchase 045615 CVS/PHARMACY #10 AUSTIN TX On 042519 ILK1TERM REF 911521045615	1504251600	48.88-
Apr 26	Debit Purchase - VISA HAPPY NAIL & SPA On 042519 HUNTINGTON B CA REF # 24431069116400904000160	6400904000	55.00-
Apr 29	Debit Purchase - VISA DELTA AIR 0060 On 042619 ATLANTA GA REF # 24717059117871171744570	7871171744	9.00-
Apr 29	Debit Purchase - VISA TACO BELL #03011 On 042719 AUSTIN TX REF # 24431069118838004464612	8838004464	12.19-
Apr 29	Debit Purchase - VISA LAZ PARKING 1203 On 042719 AUSTIN TX REF # 24055229118839601684177	8839601684	18.00-
Apr 29	Debit Purchase - VISA SQ *SUMMERMOON C On 042619 Austin TX REF # 24692169116100229944991	6100229944	18.40-
Apr 29	Debit Purchase - VISA SQ *SUMMERMOON C On 042619 Austin TX REF # 24692169116100213356608	6100213356	22.42-
Apr 29	Debit Purchase - VISA SQ *SUMMERMOON C On 042819 Austin TX REF # 24692169118100367884049	8100367884	24.15-
Apr 29	Debit Purchase - VISA CASINO EL CAMINO On 042519 AUSTIN TX REF # 24622759117500953675749	7500953675	52.25-
Apr 29	Debit Purchase - VISA GRAND CANYON UNI On 042719 623-298-5542 AZ REF # 24761979118200047500185	8200047500	250.00-
Apr 30	Debit Purchase - VISA AUSTIN AIRPORT-R On 042819 AUSTIN TX REF # 24431069119796808223684	9796808223	36.21-
May 1	Debit Purchase 703978 SPROUTS FARMERS HUNTINGTON BCA On 050119 MAESTERM REF 703978		15.28-
May 2	Debit Purchase - VISA VZWRLSS*APOCC VI On 050119 800-922-0204 FL REF # 24692169121100952345 US1	1100952345	284.69-
May 3	Debit Purchase - VISA GOLDEN SPOON FRO On 050219 HUNTINGTON B CA REF # 24692169122100724594459	2100724594	7.30-
May 6	Debit Purchase - VISA CITY OF HB PARKI On 050519 HUNTINGTN BC CA REF # 24755429126121267707348	6121267707	5.00-
May 6	Debit Purchase - VISA SQ *THE SANDWICH On 050419 SANTA ANA CA REF # 24492159124854328730023	4854328730	6.83-
May 6	Debit Purchase - VISA SQ *LINDA'S COFF On 050519 LAKE FOREST CA REF # 24492159125854191188712	5854191188	7.39-
May 6	Debit Purchase - VISA O'CONNELL'S SPOR On 050219 HUNTINGTON B CA REF # 24733099123091501000563	3091501000	41.91-
May 6	Debit Purchase - VISA SQ *THE SANDWICH On 050419 SANTA ANA CA REF # 24492159124740328437042	4740328437	53.14-
May 7	Debit Purchase - VISA CARL'S JR #11001 On 050519 HUNTINGTON B CA REF # 24431059126286388900598	4286388900	7.53-

RESP'T APP 2199

ER 000509



ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:

1 537 5390 4983

Statement Period:

Apr 19, 2019

through

May 20, 2019

Page 3 of 5

U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Card Withdrawals (continued)

Card Number: xxxx-xxxx-xxxx-7754

Date	Description of Transaction	Ref Number	Amount
May 7	Debit Purchase - VISA TASTY DONUTS AND	On 050519 HUNTINGTON B CA REF # 24323609126664231902198	6664231902 10.50-
May 10	Debit Purchase - VISA GOLDEN SPOON FRO	On 050919 HUNTINGTON B CA REF # 24692169129100893692111	9100893692 10.95-
May 10	Debit Purchase - VISA BAGELMANIA COFFE	On 050919 HUNTINGTON B CA REF # 24000979129496301482684	9496301482 11.77-
May 13	Debit Purchase 805398	WALGREENS STORE HUNTINGTON BCA On 051019 ILNKILNK REF 913100805398	9805101940 0.38-
May 13	Debit Purchase - VISA CORNER BAKERY 01	On 051019 IRVINE CA REF # 24431069131091541001009	1091541001 13.01-
May 13	Debit Purchase - VISA BODY AND SOLE CO	On 051219 HUNTINGTON B CA REF # 24377359132000002212146	2000002212 75.00-
May 14	Debit Purchase - VISA CITY OF NEWPORT	On 051319 949-6443241 CA REF # 24512399133900011957675	3900011957 1.60-
May 15	Debit Purchase - VISA HO SUM BISTRO	On 051319 NEWPORT BEAC CA REF # 24428069134500583447351	4500583447 18.68-
May 16	Debit Purchase - VISA KFC E791028	On 051519 ANAHEIM CA REF # 24431069136091572000115	6091572000 6.47-
May 17	Debit Purchase - VISA BRUEGGER'S BAGEL	On 051619 SANTA ANA CA REF # 24692169137100218381457	7100218381 12.86-
May 20	Debit Purchase - VISA JERSEY MIKES 201	On 051819 IRVINE CA REF # 24733099139400754000182	9400754000 11.31-
May 20	Debit Purchase - VISA 76 - CON 2708886	On 051919 HUNTINGTON B CA REF # 24015179139002616801986	9002616801 20.03-
May 20	Debit Purchase - VISA FOOD FOR THE HUN	On 051719 480-998-3100 AZ REF # 24765189137030021236665	7030021236 35.00-
May 20	Debit Purchase - VISA COMPASSION INTER	On 051919 800-336-7676 CO REF # 24493989139083011864 US1	9083011864 38.00-
May 20	Debit Purchase - VISA 24 Hour Fitness	On 051719 800-4326348 CA REF # 24204299137000334773 US1	7000334773 41.99-

Card 7754 Withdrawals Subtotal \$ 2,075.74-

Total Card Withdrawals \$ 2,075.74-

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Apr 22	Electronic Withdrawal REF=191120097327900N00	To SO CAL GAS 1992052494PAID SCGC 1534090996	\$ 102.01-
Apr 24	Electronic Withdrawal REF=191140093102100Y00 ACCT 03001225106	From USBANK LOAN PAYMENT 580580626 EFFECTIVE 04/24	92.68-
Apr 30	Electronic Withdrawal REF=191190184640340N00	To MACY'S 9500000000ONLINE PMTUSB377145507POS	68.82-
Apr 30	Electronic Withdrawal REF=191190184599440N00	To CAPITAL ONE CARD 9500000000ONLINE PMTUSB377145507POS	217.20-
Apr 30	Electronic Withdrawal REF=191190184676820N00	To WELLS FARGO CC 9500000000ONLINE PMTUSB377145507POS	536.02-
May 6	Internet Banking Transfer	To Account 157515405437	10,750.00-
May 13	Transfer	To Account 253752156732 1300009062	100.00-

Total Other Withdrawals \$ 11,866.73-

RESP'T APP 2200

ER 000510



ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:

1 537 5390 4983

Statement Period:

Apr 19, 2019

through

May 20, 2019

Page 4 of 5

U.S. BANK SILVER CHECKING

(CONTINUED)

U.S. Bank National Association

Account Number 1-537-5390-4983

Checks Presented Conventionally

Check	Date	Ref Number	Amount	Check	Date	Ref Number	Amount
0702	Apr 22	8053162642	110.00	0706	May 9	8953364398	65.00
0704*	Apr 26	9252567528	90.00	0726*	May 13	8053684150	4,250.00
0705	May 1	8655210413	525.00	5455*	May 13	8053912951	270.00

* Gap in check sequence

Conventional Checks Paid (6) \$ 5,310.00-

Balance Summary

Date	Ending Balance	Date	Ending Balance	Date	Ending Balance
Apr 19	2,277.76	Apr 30	655.99	May 10	5,088.82
Apr 22	1,994.91	May 1	665.71	May 13	380.43
Apr 23	1,708.08	May 2	381.02	May 14	378.83
Apr 24	1,359.40	May 3	15,373.72	May 15	360.15
Apr 25	1,310.52	May 6	4,509.45	May 16	353.68
Apr 26	1,850.65	May 7	4,491.42	May 17	340.82
Apr 29	1,444.24	May 9	4,426.42	May 20	194.49

Balances only appear for days reflecting change.

RESP'T APP 2201

ER 000511



ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

Uni-Statement

Account Number:

1 537 5390 4983

Statement Period:

Apr 19, 2019

through

May 20, 2019

Page 5 of 5

IMAGES FOR YOUR U.S. BANK SILVER CHECKING ACCOUNT

Member FDIC

Account Number 1-537-5390-4983

ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

702

APR 17 2019

PAY TO THE ORDER OF Tanae \$ 110.00
One Hundred and Ten dollars and 00/100

usbank

APR 17 2019 1537539049830702

0702

Apr 22

110.00

ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

706

MAY 2 2019

PAY TO THE ORDER OF Tanae \$ 65.00
Sixty Five dollars and 00/100

usbank

MAY 2 2019 1537539049830706

0706

May 09

65.00

ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

704

4/23/2019

PAY TO THE ORDER OF Huntington Beach High School \$ 90.00
Ninety

usbank

APR 23 2019 1537539049830704

0704*

Apr 26

90.00

ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

726

MAY 9 2019

PAY TO THE ORDER OF Geoff Draper \$ 4,250.00
Four Thousand Two Hundred and Fifty dollars and 00/100

usbank

MAY 9 2019 1537539049830726

0726*

May 13

4,250.00

ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

705

MAY 1 2019

PAY TO THE ORDER OF OCK-9 Services \$ 525.00
Five Hundred and Twenty Five dollars and 00/100

usbank

MAY 1 2019 1537539049830705

0705

May 01

525.00

ALECIA KREMIDAS-DRAPER
GEOFFREY M DRAPER
20762 CRESTVIEW LN
HUNTINGTN BCH CA 92646-5929

5455

MAY 13 2019

PAY TO THE ORDER OF Geoff Draper \$ 270.00
Two Hundred and Seventy dollars and 00/100

usbank

MAY 13 2019 15375390498305455

5455*

May 13

270.00

* Gap in check sequence

RESP'T APP 2202

ER 000512

EXHIBIT 56

EXHIBIT 56

EXHIBIT 56
RESP'T APP 2203



Page 1 of 2
Customer Service 1-800-903-3637
www.capitalone.com

Dec. 10 - Jan. 09, 2017 31 Days in Billing Cycle

Platinum MasterCard

Account ending in 5743

NEW BALANCE

\$1,455.85

MINIMUM PAYMENT

\$25.00

DUE DATE

Feb 06, 2017

PLEASE PAY AT LEAST THIS AMOUNT

Credit Limit: \$5,000.00

Cash Advance Credit Limit: \$3,000.00

Available Credit: \$3,544.15

Available Credit for Cash Advances: \$3,544.15

MINIMUM PAYMENT WARNING: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

Payment Amount Each Period If No Additional Charges Are Made	Approximate Time to Pay Off Statement Balance	Estimated Total Cost
Minimum Payment	9 Years	\$3,284
\$57	3 Years	\$2,040

Estimated savings if balance is paid off in about 3 years: **\$1,244**

If you would like information about credit counseling services, call 1-888-326-8055.

LATE PAYMENT WARNING: If we do not receive your minimum payment by your due date, you may have to pay a late fee of up to \$35.00.

Previous Balance

\$710.61

Payments and Credits

\$711.00

Fees and Interest Charged

\$0.00

Transactions

\$1,456.24

New Balance

\$1,455.85

TRANSACTIONS

PAYMENTS, CREDITS & ADJUSTMENTS FOR ALECIA A DRAPER #7454

1 04 JAN ELECTRONIC PAYMENT (\$711.00)

TRANSACTIONS FOR ALECIA A DRAPER #5743

1 03 JAN AB TEEN DRIVING ACADEMY HUNTINGTON BECA \$198.00

Total for ALECIA A DRAPER #5743 \$198.00

TRANSACTIONS FOR EMILY C REED #0036

2 10 DEC OC PARKS07148343593NY \$55.00

3 14 DEC SPROUTS FARMERS MARK HUNTINGTON BECA \$15.71

4 15 DEC AAA ANIMAL HOSPITAL HUNTINGTON BECA \$44.00

5 15 DEC BUBBLES DOG GROOMING & HUNTINGTON BECA \$66.00

6 16 DEC VONS Store00031609 HUNTINGTON BECA \$41.25

7 16 DEC AMEN CLINIC COSTA MESA CA \$200.00

8 20 DEC SPROUTS FARMERS MARK HUNTINGTON BECA \$25.42

9 23 DEC GREAT BEAR AUTO CENTER HUNTINGTON BECA \$380.07

10 02 JAN TWIN PEAKS VETERINARY TUCSON AZ \$137.75

11 03 JAN TWIN PEAKS VETERINARY TUCSON AZ \$200.00

Transactions continue on page 2

**It's easy to set up your
FREE account alerts:**

First, "Log In" to Online Banking. Next, sign up by:

1. Clicking "Messaging and Alerts"
2. Clicking "Set Alerts"
3. Choosing the free alerts you'd like to receive.

Your carrier may charge a fee for each text message alert you receive.

300007-C

INTEREST CHARGE CALCULATION

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
Purchases	23.40% P	\$0.00	\$0.00
Cash Advances	25.40% P	\$0.00	\$0.00

P, L, D, F = Variable Rate. See reverse of page 1 for details

PLEASE RETURN PORTION BELOW WITH PAYMENT OR LOG ON TO WWW.CAPITALONE.COM TO MAKE YOUR PAYMENT ONLINE.

1 5178058436735743 09 1455850711000025007



Account ending in 5743

Due Date

Feb. 06, 2017

New Balance

\$1,455.85

Minimum Payment

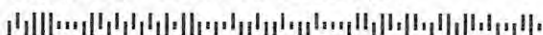
\$25.00

Amount Enclosed

.

PLEASE PAY AT LEAST
THIS AMOUNT

ALECIA A DRAPER
20762 CRESTVIEW LN
HUNTINGTON BEACH, CA 92646-5929



LESS WASTE!

Since you haven't been sending your payments by mail for the past year, we'll stop sending those pesky envelopes. You can continue to eliminate waste by signing up for paperless statements at www.capitalone.com.

400022

Capital One Bank (USA), N.A.
P.O. Box 60599
City of Industry, CA 91716-0599

RESP'T APP 2204

1 5178058436735743 09 1455850711000025007

ER 000513



Dec. 10 - Jan. 09, 2017 31 Days in Billing Cycle

Platinum MasterCard

Account ending in 5743

NEW BALANCE

\$1,455.85

MINIMUM PAYMENT

\$25.00

DUE DATE

Feb 06, 2017

Credit Limit: \$5,000.00

Available Credit: \$3,544.15

Cash Advance Credit Limit: \$3,000.00

Available Credit for Cash Advances: \$3,000.00

Previous Balance

\$710.61

Payments and Credits

\$711.00

Fees and Interest Charged

\$0.00

Transactions

\$1,456.24

New Balance

\$1,455.85

TRANSACTIONS CONTINUED

TRANSACTIONS FOR EMILY C REED #0036 (CONTINUED)

12 03 JAN TWIN PEAKS VETERINARYTUCSONAZ \$93.04

Total for EMILY C REED #0036 \$1,258.24

▶ Total Transactions This Period \$1,456.24

FEES

Total Fees This Period \$0.00

INTEREST CHARGED

Total Interest This Period \$0.00

TOTALS YEAR TO DATE

Total Fees This Year \$0.00

Total Interest This Year \$0.00

Check this out - just a quick reminder that your account number has changed. So activate your card, and if you've set up automatic payments with any merchants or utilities, be sure to give them your new number. That way, your Capital One card will continue to automatically pay your bills, and you will continue to save time and money. As always, thanks for choosing Capital One.

RESP'T APP 2205

ER 000514



Payment Information

Payment Due Date **Apr. 06, 2017**
For online and phone payments, the deadline is 8pm ET.

New Balance **\$298.37**
Minimum Payment Due **\$31.00**

LATE PAYMENT WARNING: If we do not receive your minimum payment by your due date, you may have to pay a late fee of up to \$35.00.

MINIMUM PAYMENT WARNING: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Minimum Payment	14 Month(s)	\$341

If you would like information about credit counseling services, call 1-888-326-8055.

Account Summary

Previous Balance	\$1,575.36
Payments	- \$1,575.36
Other Credits	\$0.00
Transactions	+ \$244.72
Cash Advances	+ \$0.00
Fees Charged	+ \$25.00
Interest Charged	+ \$28.65
New Balance	= \$298.37
Credit Limit	\$5,000.00
Available Credit (as of Mar. 09, 2017)	\$4,701.63
Cash Advance Credit Limit	\$3,000.00
Available Credit for Cash Advances	\$3,000.00



Make a statement.
Go paperless.

Stop waiting for your bill to arrive in the mail and go paperless today.

Log in to your account to make the switch to paperless.

300083

Account Notifications



Renewal Notice - Both sides of this page provide important information about your rate(s) and how your interest charge is calculated.



Check this out - just a quick reminder that your account number has changed. So activate your card, and if you've set up automatic payments with any merchants or utilities, be sure to give them your new number. That way, your Capital One card will continue to automatically pay your bills, and you will continue to save time and money. As always, thanks for choosing Capital One.

Additional notifications on page 2

Pay or manage your account on our mobile app or at www.capitalone.com.

Customer Service: 1-800-903-3637

See reverse for Important Information



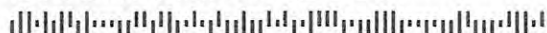
Please send us this portion of your statement and only one check (or one money order) to ensure your payment is processed promptly. Allow at least seven business days for delivery.

Payment Due Date: **Apr. 06, 2017**

Account Ending in 5743

New Balance **\$298.37**
Minimum Payment Due **\$31.00**
Amount Enclosed \$ _____

ALECIA A DRAPER
20762 CRESTVIEW LN
HUNTINGTON BEACH, CA 92646-5929



Thanks for using
less paper!

Now that you're paying your bill online or by phone, we'll no longer include a return envelope.

400032

Capital One Bank (USA), N.A.
P.O. Box 60599
City of Industry, CA 91716-0599

RESP'T APP 2206

Transactions		
Visit to see detailed transactions.		
ALEGIA A DRAPER #5743: Payments, Credits and Adjustments		
Date	Description	Amount
ALEGIA A DRAPER #7454: Payments, Credits and Adjustments		
Date	Description	Amount
Mar 7	ELECTRONIC PAYMENT	-\$1,575.36
ALEGIA A DRAPER #5743: Transactions		
Date	Description	Amount
Feb 12	CARL'S JR #1100125HUNTINGTON BECA	\$5.93
Feb 13	SQU*SQ *AFTERS ICE CREFountain VallCA	\$7.00
Feb 13	BREAD CRUMB OHANA CAFEHUNTINGTON BECA	\$13.46
Feb 13	MCDONALD'S F24510HUNTINGTON BECA	\$2.79
Feb 13	PANERA BREAD #3268HUNTINGTON BECA	\$11.83
Feb 14	PANDA EXPRESS #731HUNTINGTON BECA	\$23.14
Feb 16	BARTUCCIS NY PIZZAHUNTINGTON BECA	\$9.00
Feb 16	MIMIS CAFE 18FOUNTAIN VALLCA	\$21.36
Feb 16	PAYLESS SHOES00034033HUNTINGTON BECA	\$91.57
Feb 20	CITY OF HB PARKING METHUNTINGTN BCHCA	\$3.00
Feb 20	7-ELEVEN 13820HUNTINGTON BECA	\$8.61
Feb 25	PP*MYITTYBITTYROADSHOWPALACA	\$16.20
ALEGIA A DRAPER #5743: Total		\$213.89
EMILY C REED #0036: Transactions		
Date	Description	Amount
Mar 6	STAPLES 00113027HUNTINGTON BECA	\$3.38
Mar 7	STAPLES 00113027HUNTINGTON BECA	\$27.45
EMILY C REED #0036: Total		\$30.83
Total Transactions for This Period		\$244.72
Fees		
Date	Description	Amount
Mar 6	PAST DUE FEE	\$25.00
Total Fees for This Period		\$25.00

Transactions Continued	
Interest Charged	
Interest Charge on Purchases	\$28.65
Interest Charge on Cash Advances	\$0.00
Interest Charge on Other Balances	\$0.00
Total Interest for This Period	\$28.65
2017 Totals Year-to-Date	
Total Fees charged in 2017	\$25.00
Total Interest charged in 2017	\$28.65

Interest Charge Calculation			
Your Annual Percentage Rate (APR) is the annual interest rate on your account.			
Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
Purchases	23.40% P	\$1,595.77	\$28.65
Cash Advances	25.40% P	\$0.00	\$0.00
P,L,D,F = Variable Rate. See reverse of page 1 for details.			

Additional Account Notifications	
	You were assessed a past due fee because your minimum payment was not received by the due date. To avoid this fee in the future, we recommend that you allow at least 7 business days for your minimum payment to reach Capital One.

Track your card's every move.
 Get tools to help you manage and track your spending in real time with Capital One Wallet™.

Text TRACK to 80101 to download the app. Messaging & Data rates may apply.

RESP'T APP 2207

ER 000516



Payment Information

Payment Due Date
May 06, 2017

For online and phone payments,
the deadline is 8pm ET.

New Balance
\$1,475.44

Minimum Payment Due
\$25.00

LATE PAYMENT WARNING: If we do not receive your minimum payment by your due date, you may have to pay a late fee of up to \$35.00.

MINIMUM PAYMENT WARNING: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Minimum Payment	10 Years	\$3,373
\$58	3 Years	\$2,074
Estimated savings if balance is paid off in about 3 years: \$1,299		

If you would like information about credit counseling services, call 1-888-326-8055.

Account Summary

Previous Balance	\$298.37
Payments	- \$300.00
Other Credits	\$0.00
Transactions	+ \$1,473.15
Cash Advances	+ \$0.00
Fees Charged	+ \$0.00
Interest Charged	+ \$3.92
New Balance	= \$1,475.44

Credit Limit	\$5,000.00
Available Credit (as of Apr. 09, 2017)	\$3,524.56
Cash Advance Credit Limit	\$3,000.00
Available Credit for Cash Advances	\$3,000.00



See purchases on your time—
in real time.
Capital One Wallet™ gives you instant purchase notifications. And you can lock your card anytime.

300078

Text TRACK to 80101 to download the app today. Messaging & Data rates may apply.

Account Notifications

- i** Check this out - just a quick reminder that your account number has changed. So activate your card, and if you've set up automatic payments with any merchants or utilities, be sure to give them your new number. That way, your Capital One card will continue to automatically pay your bills, and you will continue to save time and money. As always, thanks for choosing Capital One.

Pay or manage your account on our mobile app or at www.capitalone.com.

Customer Service: 1-800-903-3637

See reverse for Important Information



Please send us this portion of your statement and only one check (or one money order) to ensure your payment is processed promptly. Allow at least seven business days for delivery.

Payment Due Date: **May 06, 2017**

Account Ending in 5743

New Balance	Minimum Payment Due	Amount Enclosed
\$1,475.44	\$25.00	\$ _____

ALECIA A DRAPER
20762 CRESTVIEW LN
HUNTINGTON BEACH, CA 92646-5929



Thanks for using
less paper!

Now that you're paying your bill online or by phone, we'll no longer include a return envelope.

400032

Capital One Bank (USA), N.A.
P.O. Box 60599
City of Industry, CA 91716-0599

RESP'T APP 2208

1 5178058436735743 09 147544 **ER 000517** 002



Transactions

Visit [capitalone.com](#) to see detailed transactions.

ALECIA A DRAPER #5743: Payments, Credits and Adjustments

Date	Description	Amount
------	-------------	--------

ALECIA A DRAPER #7454: Payments, Credits and Adjustments

Date	Description	Amount
------	-------------	--------

Mar 30	ELECTRONIC PAYMENT	- \$200.00
--------	--------------------	------------

Mar 30	ELECTRONIC PAYMENT	- \$100.00
--------	--------------------	------------

ALECIA A DRAPER #5743: Transactions

Date	Description	Amount
------	-------------	--------

Mar 25	VLG. NURSERIES LP -H.BHUNTINGTON BECA	\$573.12
--------	--	----------

Mar 28	THE PERFECT WORKOUT -760-436-1700CA	\$75.00
--------	--	---------

ALECIA A DRAPER #5743: Total		\$648.12
-------------------------------------	--	-----------------

EMILY C REED #0036: Transactions

Date	Description	Amount
------	-------------	--------

Mar 11	PAYPAL *GOTEAMTHERA4029357733CA	\$301.25
--------	---------------------------------	----------

Mar 16	76 - JEEJ SVC STATIONSHUNTINGTON BECA	\$39.53
--------	--	---------

Mar 24	AMEN CLINICCOSTA MESACA	\$200.00
--------	-------------------------	----------

Apr 5	CORONA DEL MAR ANIMALCORONA DL MARCA	\$274.25
-------	---	----------

Apr 6	AMERICAN KENNEL CLUB09198163600NY	\$10.00
-------	--------------------------------------	---------

EMILY C REED #0036: Total		\$825.03
----------------------------------	--	-----------------

Total Transactions for This Period		\$1,473.15
---	--	-------------------

Fees

Date	Description	Amount
------	-------------	--------

Total Fees for This Period		\$0.00
-----------------------------------	--	---------------

Interest Charged

Interest Charge on Purchases	\$3.92
------------------------------	--------

Interest Charge on Cash Advances	\$0.00
----------------------------------	--------

Interest Charge on Other Balances	\$0.00
-----------------------------------	--------

Total Interest for This Period	\$3.92
---------------------------------------	---------------

Transactions Continued

2017 Totals Year-to-Date

Total Fees charged in 2017	\$25.00
-----------------------------------	----------------

Total Interest charged in 2017	\$32.57
---------------------------------------	----------------

Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
Purchases	23.65% P	\$195.07	\$3.92
Cash Advances	25.65% P	\$0.00	\$0.00

P, L, D, F = Variable Rate. See reverse of page 1 for details.



Get the app designed to save time.
Effortlessly manage your account on the go with
the Capital One® mobile app.

Text ONE to 80101 to download the app. Messaging & Data rates may apply.

RESP'T APP 2209

ER 000518

Payment Information

Payment Due Date
Jun. 06, 2017

For online and phone payments,
the deadline is 8pm ET.

New Balance
\$1,080.04

Minimum Payment Due
\$25.00

LATE PAYMENT WARNING: If we do not receive your minimum payment by your due date, you may have to pay a late fee of up to \$35.00.

MINIMUM PAYMENT WARNING: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Minimum Payment	7 Years	\$2,142
\$42	3 Years	\$1,518
Estimated savings if balance is paid off in about 3 years: \$624		

If you would like information about credit counseling services, call 1-888-326-8055.

Account Summary

Previous Balance	\$1,475.44
Payments	- \$1,474.00
Other Credits	\$0.00
Transactions	+ \$1,065.02
Cash Advances	+ \$0.00
Fees Charged	+ \$0.00
Interest Charged	+ \$13.58
New Balance	= \$1,080.04
Credit Limit	\$5,000.00
Available Credit (as of May 09, 2017)	\$3,919.96
Cash Advance Credit Limit	\$3,000.00
Available Credit for Cash Advances	\$3,000.00



Stay on top of your credit score.
Monitor your credit score with CreditWise® built right into the Capital One® mobile app.

Text ONE to 80101 to download the app. Messaging & Data rates may apply.

Account Notifications

- ① Check this out - just a quick reminder that your account number has changed. So activate your card, and if you've set up automatic payments with any merchants or utilities, be sure to give them your new number. That way, your Capital One card will continue to automatically pay your bills, and you will continue to save time and money. As always, thanks for choosing Capital One.

Pay or manage your account on our mobile app or at www.capitalone.com.

Customer Service: 1-800-903-3637

See reverse for Important Information



Please send us this portion of your statement and only one check (or one money order) to ensure your payment is processed promptly. Allow at least seven business days for delivery.

Payment Due Date: **Jun. 06, 2017**

Account Ending in 5743

New Balance
\$1,080.04

Minimum Payment Due
\$25.00

Amount Enclosed
\$ _____

ALECIA A DRAPER
20762 CRESTVIEW LN
HUNTINGTON BEACH, CA 92646-5929



Thanks for using less paper!

Now that you're paying your bill online or by phone, we'll no longer include a return envelope.

Capital One Bank (USA), N.A.
P.O. Box 60599
City of Industry, CA 91716-0599

RESP'T APP 2210

1 5178058436735743 09 1080041474000025003

ER 000519

Transactions

Visit [capitalone.com](#) to see detailed transactions.

ALECIA A DRAPER #5743: Payments, Credits and Adjustments

Date	Description	Amount
------	-------------	--------

ALECIA A DRAPER #7454: Payments, Credits and Adjustments

Date	Description	Amount
------	-------------	--------

May 5	ELECTRONIC PAYMENT	- \$1,474.00
-------	--------------------	--------------

ALECIA A DRAPER #5743: Transactions

Date	Description	Amount
------	-------------	--------

Apr 15	THE PERFECT WORKOUT -760-436-1700CA	\$408.33
--------	--	----------

Apr 30	SQU*SQ *GOSQ.COM JANAENewport BeachCA	\$66.00
--------	--	---------

May 1	THE UPS STORE 4415HUNTINGTON BECA	\$15.61
-------	-----------------------------------	---------

May 2	DAVISON DESIGN ANDPITTSBURGHPA	\$100.00
-------	--------------------------------	----------

ALECIA A DRAPER #5743: Total		\$589.94
-------------------------------------	--	-----------------

EMILY C REED #0036: Transactions

Date	Description	Amount
------	-------------	--------

Apr 14	AMEN CLINICCOSTA MESACA	\$200.00
--------	-------------------------	----------

Apr 19	MAMMOTH MTN FOODMAMMOTH LAKESCA	\$8.30
--------	------------------------------------	--------

Apr 23	HB YOGURT LAND QPSHUNTINGTON BECA	\$28.13
--------	--------------------------------------	---------

Apr 25	LA CAPILLA RESTAURANHUNTINGTON BCCA	\$21.72
--------	--	---------

Apr 25	LA CAPILLA RESTAURANHUNTINGTON BCCA	\$3.18
--------	--	--------

Apr 27	AMEN CLINICCOSTA MESACA	\$200.00
--------	-------------------------	----------

Apr 30	VONS Store00031609HUNTINGTN BCHCA	\$13.75
--------	--------------------------------------	---------

EMILY C REED #0036: Total		\$475.08
----------------------------------	--	-----------------

Total Transactions for This Period		\$1,065.02
---	--	-------------------

Fees

Date	Description	Amount
------	-------------	--------

Total Fees for This Period		\$0.00
-----------------------------------	--	---------------

Transactions Continued

Interest Charged

Interest Charge on Purchases	\$13.58
------------------------------	---------

Interest Charge on Cash Advances	\$0.00
----------------------------------	--------

Interest Charge on Other Balances	\$0.00
-----------------------------------	--------

Total Interest for This Period	\$13.58
---------------------------------------	----------------

2017 Totals Year-to-Date

Total Fees charged in 2017	\$25.00
-----------------------------------	----------------

Total Interest charged in 2017	\$46.15
---------------------------------------	----------------

Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
Purchases	23.65% P	\$698.59	\$13.58
Cash Advances	25.65% P	\$0.00	\$0.00

P, L, D, F = Variable Rate. See reverse of page 1 for details.



Make a statement.
Go paperless.

Stop waiting for your bill to arrive
in the mail and go paperless today.

Log in to your account to make the switch to paperless.

300083

RESP'T APP 2211

ER 000520

EXHIBIT 57

EXHIBIT 57

EXHIBIT 57
RESP'T APP 2212

WELLS FARGO

VISA

Account Number
Statement Billing Period
Page 1 of 13984
12/23/2016 to 01/10/2017WELLS
FARGO

Balance Summary

Previous Balance \$55.92
 - Payments \$0.00
 - Other Credits \$55.92
 + Cash Advances \$0.00
 + Purchases, Balance Transfers & Other Charges \$0.00
 + Fees Charged \$0.00
 + Interest Charged \$0.00
 = New Balance \$0.00

24-Hour Customer Service: 1-800-642-4720
 TTY for Hearing/Speech Impaired: 1-800-419-2265
 Outside the US Call Collect: 1-925-825-7600
 Wells Fargo Online®: wells.fargo.com

Send General Inquiries To:
 PO Box 10347, Des Moines IA, 50306-0347

Total Credit Limit \$5,000 Total Available Credit \$0

Payment Information

New Balance \$0.00
 Minimum Payment \$0.00
 Payment Due Date 01/16/2017

Transactions

Trans	Post	Reference Number	Description	Credits	Charges
-------	------	------------------	-------------	---------	---------

Other Credits

01/10	01/10	F5583000A00999990	CHARGE OFF ACCOUNT-PRINCIPALS	55.92	
TOTAL OTHER CREDITS FOR THIS PERIOD				\$55.92	

Fees Charged

TOTAL FEES CHARGED FOR THIS PERIOD \$0.00

Interest Charged

INTEREST CHARGE ON PURCHASES	0.00
INTEREST CHARGE ON CASH ADVANCES	0.00
TOTAL INTEREST CHARGED FOR THIS PERIOD	\$0.00

2017 Totals Year-to-Date

TOTAL FEES CHARGED IN 2017	\$0.00
TOTAL INTEREST CHARGED IN 2017	\$0.00

Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Days in Billing Cycle	Interest Charge
PURCHASES	22.49% variable	\$0.00	19	\$0.00
CASH ADVANCES	24.49% variable	\$0.00	19	\$0.00

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

5596 YXG 1 3 14 170110 0 2 PAGE 1 of 1 10 5583 2000 C1HX 01DP5596

Account Number 4465 4204 9985 3984
 New Balance \$0.00
 Minimum Payment \$0.00
 Payment Due Date 01/16/2017

0000000000000030000000000044654204998539844

Amount
Enclosed

ALECIA A KREMIDAS



WELLS FARGO CARD SERVICES
 P.O. Box 5193
 LOS ANGELES CA 90051-3493
 RESPT APP 2213

☐ Check here and see reverse for address and/or phone number correction.

ER 000521

IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Billing Rights Summary. If you believe your bill is wrong (an "Error"), or if you need more information about a transaction on your bill, write to us on a separate sheet of paper as soon as possible at: P.O. Box 522, Des Moines, IA 50306-0522. We must hear from you no later than 60 days after we sent you the first bill on which the Error appeared. You may notify us using other means (including calling us at the number listed on the front of the statement), but doing so will not preserve your rights.

In your letter (a "Written Notice"), provide the following information:

- Your name and account number.
- The date and dollar amount of suspected Error.
- Description of the Error and why you believe there is an Error. If you need more information, please describe the item you are not sure about.

You do not have to pay any alleged Error amount while we are investigating, but you are still obligated to pay the parts of your bill that are not part of the alleged Error amount. While we investigate, we cannot report you as delinquent or take any action to collect the alleged Error amount. If you have authorized us to pay your credit card bill automatically from your savings or checking account, you can stop the payment on any amount you believe is an Error. To stop the payment, your Written Notice must reach us three (3) business days before the automatic payment is scheduled to occur.

Special Rule for Credit Card Purchases: If you have a problem with the quality of goods or services you purchased with a credit card, and you have tried in good faith to correct the problem with the merchant, you may not have to pay the remaining amount due on the goods or services. You have this protection only when the purchase price was more than \$50 and the purchase was made in your home state or within 100 miles of your mailing address and you have not paid the balance of the disputed charge. If we own or operate the merchant, or if we mailed you the advertisement for the property or services, all purchases are covered regardless of amount or location of purchase.

Credit Information, NOTICE: We may furnish information about your account to consumer reporting agencies. You have the right to dispute the accuracy of information that we have reported by writing to us at P.O. Box 14517, Des Moines, IA 50306-3517 and describing the specific information that is inaccurate or in dispute and the basis for any dispute with supporting documentation. In the case of information that you believe relates to an identity theft, you will need to provide us with an identity theft report.

Payments. "Conforming Payments" are payments mailed using the enclosed envelope and payment coupon to the payment address specified on the statement or, generally, made via the "Transfers" tab or "Make a Payment" link on the credit card Account Activity tab of Wells Fargo Online Banking at www.wellsfargo.com. Conforming Payments received via mail by 5:00 p.m. will be credited as of the date of receipt. Conforming Payments received after 5:00 p.m. will be credited as of the next day. Cut-off times for Conforming Payments made via our Web site will be disclosed at the time of the transaction. "Non-Conforming Payments" are payments made by any other means and may not receive credit for up to five days after the date of receipt. Non-Conforming payments include, but are not limited to, placing the provided envelope and payment coupon in another envelope.

Notice About Electronic Check Conversion: When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

Payment in Full for Less Than Account Balance Request: If you intend to pay your account in full with an amount less than the total owed on your account, you must send your request to us at: P.O. Box 10311, Des Moines, IA 50306-0311. Such payments will not discharge your full debt.

How We Calculate Your Balance. We use a method called "average daily balance (including new purchases)". For more information regarding this calculation, please call our toll-free Customer Service number located on the front of this statement.

How to Avoid Paying Interest on Purchases. Your Payment Due Date is at least 25 days after the close of each billing period. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the transaction date.

Secured Accounts. For Secured accounts, your credit card account is secured by a pledge of your Secured Card Collateral Account with Wells Fargo Bank, N.A., established in connection with your application for the card. You agree that this pledge includes and gives the right to Bank to repossess, collect and withdraw any part or the full amount of the Secured Card Collateral Account upon any default under your Secured credit card agreement, or in the event your Secured credit card agreement is terminated by Bank for any reason. This pledge is given as a security interest for any and all amounts you owe, including interest, fees and costs which may accrue under your Secured credit card account. You agree that if your Secured credit card account is closed for any reason, the bank may apply funds in the Secured Card Collateral Account to pay off any balance on the credit card account. If there are still funds remaining in the Collateral Account after doing so, these funds may remain on deposit for up to 60 days before being remitted to you.

Customer Service Monitoring. Calls may be recorded or monitored.

INFORMACIÓN IMPORTANTE SOBRE SU CUENTA

Resumen de Derechos de Facturación. Si cree que hay algún error en su estado de cuenta (un "Error"), o si necesita más información sobre una transacción que aparece en su estado de cuenta, por favor escríbanos en una hoja separada tan pronto como lo sea posible, a la siguiente dirección: P.O. Box 522, Des Moines, IA 50306-0522. Debe comunicarse con nosotros dentro de un lapso de 60 días de la fecha en que le hayamos enviado el primer estado de cuenta en que apareció el Error. Puede comunicarse con nosotros por otros medios (lo que incluye llamarnos al número que aparece en el frente del estado de cuenta) pero al hacerlo no preservará sus derechos.

En su carta (una "Notificación por Escrito"), por favor incluya la siguiente información:

- Su nombre y número de cuenta.
- La fecha y el monto en dólares del Error del que sospecha.
- Una descripción del Error y la razón por la cual usted cree que es un Error. Si necesita más información, por favor describa el ítem del que no está seguro.

No tiene que pagar el monto del supuesto Error mientras lo investiguemos, pero seguirá obligado a pagar las porciones del saldo de su cuenta que no formen parte del monto del supuesto Error. Mientras investiguemos, no podremos reportarlo en calidad de deudor moroso, ni tomar medidas para cobrar el monto del supuesto Error. Si nos ha autorizado a pagar su cuenta de tarjeta de crédito de manera automática desde su cuenta de cheques o de ahorros, puede suspender el pago por cualquier monto que crea que es un Error. Para suspender el pago, su Notificación por Escrito debe llegarnos tres (3) días hábiles antes del día en que esté programado el pago automático.

Regla Especial para Compras con Tarjeta de Crédito: Si usted tiene algún problema con la calidad de los bienes o servicios que adquirió con una tarjeta de crédito, y ha intentado de buena fe resolver el problema con el comerciante, quizá no tenga que pagar el monto restante adeudado por los bienes o servicios. Usted cuenta con esta protección solamente si el precio de compra superó a los \$50 y la compra fue realizada en el estado en que nació o a una distancia no superior a 100 millas de su dirección postal, y siempre que no haya pagado el saldo del cargo en disputa. Si somos los propietarios u operadores de dicho comercio, o si le enviamos por correo un anuncio publicitario de los bienes o servicios, todas las compras están cubiertas, sin importar el monto o lugar de la compra.

Información de Crédito, AVISO: Podremos dar información sobre su cuenta a las agencias de informes sobre consumidores. Usted tiene el derecho a cuestionar la exactitud de la información reportada por nosotros al escribir a la siguiente dirección: P.O. Box 14517, Des Moines, IA 50306-3517. En su carta, deberá describir la información específica que sea inexacta o en disputa, y fundamentar cualquier disputa con documentación de respaldo. Si considero que se trata de información relacionada con el robo de identidad, deberá enviarnos una denuncia de robo de identidad correspondiente.

Pagos. Los "Pagos en Conformidad" son pagos enviados con el sobre adjunto y talón de pago a la dirección de pago especificada en el estado de cuenta o en general a través de la ficha "Transfers" (sólo disponible en inglés) o "Make a Payment" en la ficha "Account Activity" (sólo disponible en inglés) de los servicios en línea por Internet de Wells Fargo en www.wellsfargo.com. Los Pagos en Conformidad recibidos por correo a más tardar a las 5 p.m. serán acreditados a la fecha de su recibo. Los Pagos en Conformidad recibidos después de las 5 p.m. serán acreditados al día siguiente. Las horas de límite para Pagos en Conformidad realizados a través de nuestro sitio Web serán reveladas al momento de la transacción. Los "Pagos en Incumplimiento" son pagos efectuados por cualquier otro medio y es posible que no reciban crédito durante hasta 5 días después de la fecha de recibo. Los Pagos en Incumplimiento incluyen, sin limitación, poner el sobre proporcionado y talón de pago en otro sobre.

Aviso Sobre Conversión de Cheques Electrónicos: Al proporcionar un cheque como forma de pago, usted nos da su autorización para utilizar la información de su cheque a fin de realizar una sola transferencia electrónica de su cuenta o procesar el pago como una transacción de cheque. Cuando nosotros usamos la información de su cheque para realizar una transferencia electrónica de fondos, los mismos podrán ser retirados de su cuenta tan rápido como el mismo día en que recibamos su pago, y su institución financiera no le regresará su cheque.

Pago Total por un Monto Inferior al Saldo de la Cuenta: Si usted piensa liquidar la totalidad del saldo de su cuenta por un monto inferior al monto total adeudado en su cuenta, deberá enviarnos su solicitud a la siguiente dirección: P.O. Box 10311, Des Moines, IA 50306-0311. Dichos pagos no cancelarán la totalidad de su deuda.

Cómo Calculamos Su Saldo. Usamos un método denominado "saldo diario promedio (incluyendo nuevas compras)". Para más información acerca de este cálculo, por favor llame a nuestro número gratuito de Servicio al Cliente indicado al frente de este estado de cuenta.

Cómo Evitar Pagar Intereses sobre Compras. La Fecha de Vencimiento del Pago es al menos 25 días después del cierre de cada periodo de facturación. No cargaremos intereses sobre los pagos si usted paga la totalidad de su saldo a más tardar en la fecha de vencimiento de cada mes. Comenzaremos a cargar intereses sobre adelantos en efectivo y transferencias de saldo a la fecha de transacción.

Cuentas Garantizadas. Para Cuentas Garantizadas, su cuenta de tarjeta de crédito está garantizada por la entrega en prenda de su Cuenta Colateral de la Tarjeta Garantizada de Wells Fargo Bank N.A., establecida en relación con su solicitud de la tarjeta. Usted conviene en que esta entrega en prenda incluye y da al Banco el derecho a redimir, cobrar y retirar cualquier parte o la totalidad del monto depositado en la Cuenta Colateral de la Tarjeta Garantizada en caso de cualquier acto de incumplimiento bajo su convenio de la tarjeta de crédito garantizada, o en caso de que dicho convenio sea terminado por el Banco, por cualquier motivo. Esta prenda se entrega como garantía de cada uno y todos los montos que usted adeude, incluidos los intereses, cuotas y costos que pueden acumularse bajo su Cuenta de Tarjeta de Crédito Garantizada. Usted está de acuerdo en que si su Cuenta de Tarjeta de Crédito Garantizada se cierra por cualquier razón, el banco podrá aplicar los fondos mantenidos en la Cuenta Colateral de la Tarjeta Garantizada para liquidar cualquier saldo en la cuenta de tarjeta de crédito. Si después de hacerlo aún quedan fondos en la Cuenta Colateral, dichos fondos podrán permanecer en depósito durante hasta 60 días antes de que sean remitidos a usted.

Monitoreo del Servicio al Cliente. Las llamadas pueden ser grabadas o monitoreadas.

01DP5596 - 9 - 04/01/2015

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Change of Address Form - If your address has changed, provide your complete new address below. Be sure to check box on reverse side of coupon and enclose in the envelope provided. Please use this section only for address changes. If you have any questions, please call the toll-free customer service number on the front of this statement.

Formulario de Cambio de Dirección - Si su dirección ha cambiado, proporcione su nueva dirección completa abajo. Asegúrese de indicar el cuadro al dorso del cupón y adjuntarlo en el sobre anexo. Por favor use esta sección solamente para cambios de dirección. Si tiene preguntas, por favor llame al número de Servicio al Cliente al frente de este estado de cuenta.

ACCOUNT FIRST NAME		ACCOUNT LAST NAME	
NEW STREET ADDRESS			
PO BOX / APT #			
CITY, STATE/ZIP			
HOME PHONE		WORK PHONE	

RESP'T APP 2214

ER 000522

WELLS FARGO

VISA

Account Number
Statement Billing Period
Page 1 of 23984
01/23/2017 to 02/19/2017WELLS
FARGO

Balance Summary

Previous Balance \$55.92
 - Payments \$100.00
 - Other Credits \$0.00
 + Cash Advances \$0.00
 + Purchases, Balance Transfers & Other Charges \$100.00
 + Fees Charged \$0.00
 + Interest Charged \$0.00
 = New Balance \$55.92

24-Hour Customer Service: 1-800-642-4720
 TTY for Hearing/Speech Impaired: 1-800-419-2265
 Outside the US Call Collect: 1-925-825-7600
 Wells Fargo Online®: wells Fargo.com

Send General Inquiries To:
 PO Box 10347, Des Moines IA, 50306-0347

Total Credit Limit

\$5,000

Total Available Credit

\$0

Payment Information

New Balance \$55.92
 Minimum Payment \$10.00
 Payment Due Date 03/16/2017

Send Payments To:
 PO Box 51193, Los Angeles CA, 90051-5493

Late Payment Warning: If we do not receive your Minimum Payment by 03/16/2017, you may have to pay a late fee up to \$0.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay ...	You will pay off the New Balance shown on this statement in about ...	And you will end up paying an estimated total of ...
Only the minimum payment	6 month(s)	\$56

If you would like information about credit counseling services, refer to www.usdoj.gov/ust/eo/bapcpa/ccde/cc_approved.htm or call 1-877-285-2108.

Transactions

Trans	Post	Reference Number	Description	Credits	Charges
& TRANSACTION WAS TRANSFERRED FROM LOST / STOLEN ACCOUNT					

Payments

01/30	01/30	& F55830010000IXFRL	PAYMENT - THANK YOU	100.00	
TOTAL PAYMENTS FOR THIS PERIOD				\$100.00	

Purchases, Balance Transfers & Other Charges

02/02	02/02	F55830011000TF033	PAYMENT ON 01/30/17 POSTED IN ERROR		100.00
TOTAL PURCHASES, BALANCE TRANSFERS & OTHER CHARGES FOR THIS PERIOD					\$100.00

Fees Charged

TOTAL FEES CHARGED FOR THIS PERIOD	\$0.00
------------------------------------	--------

Interest Charged

INTEREST CHARGE ON PURCHASES	0.00
INTEREST CHARGE ON CASH ADVANCES	0.00
TOTAL INTEREST CHARGED FOR THIS PERIOD	\$0.00

2017 Totals Year-to-Date

TOTAL FEES CHARGED IN 2017	\$0.00
TOTAL INTEREST CHARGED IN 2017	\$0.00

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Continued

5596 YKG 1 3 14 170219 0 2 PAGE 1 of 2 10 5583 2000 CHGZ 01DP5596

Detach and mail with check payable to Wells Fargo

Account Number 4465 4204 9985 3984
 New Balance \$55.92
 Minimum Payment \$10.00
 Payment Due Date 03/16/2017

00005592000100000000100044654204998539848

Amount
Enclosed

ALECIA A KREMDAS



WELLS FARGO CARD SERVICES
 PO Box 51193
 LOS ANGELES CA 90051-5493


☐ Check here and see reverse for address and/or phone number correction.

ER 000523

IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Billing Rights Summary. If you believe your bill is wrong (an "Error"), or if you need more information about a transaction on your bill, write to us on a separate sheet of paper as soon as possible at: P.O. Box 522, Des Moines, IA 50306-0522. We must hear from you no later than 90 days after we sent you the first bill on which the Error appeared. You may notify us using other means (including calling us at the number listed on the front of the statement), but doing so will not preserve your rights.

In your letter (a "Written Notice"), provide the following information:

- Your name and account number.
- The date and dollar amount of suspected Error.
- Description of the Error and why you believe there is an Error. If you need more information, please describe the item you are not sure about.

You do not have to pay any alleged Error amount while we are investigating, but you are still obligated to pay the parts of your bill that are not part of the alleged Error amount. While we investigate, we cannot report you as delinquent or take any action to collect the alleged Error amount. If you have authorized us to pay your credit card bill automatically from your savings or checking account, you can stop the payment on any amount you believe is an Error. To stop the payment, your Written Notice must reach us three (3) business days before the automatic payment is scheduled to occur.

Special Rule for Credit Card Purchases: If you have a problem with the quality of goods or services you purchased with a credit card, and you have tried in good faith to correct the problem with the merchant, you may not have to pay the remaining amount due on the goods or services. You have this protection only when the purchase price was more than \$50 and the purchase was made in your home state or within 100 miles of your mailing address and you have not paid the balance of the disputed charge. If we own or operate the merchant, or if we mailed you the advertisement for the property or services, all purchases are covered regardless of amount or location of purchase.

Credit Information. NOTICE: We may furnish information about your account to consumer reporting agencies. You have the right to dispute the accuracy of information that we have reported by writing to us at P.O. Box 14517, Des Moines, IA 50306-3517 and describing the specific information that is inaccurate or in dispute and the basis for any dispute with supporting documentation. In the case of information that you believe relates to an identity theft, you will need to provide us with an identity theft report.

Payments. "Conforming Payments" are payments mailed using the enclosed envelope and payment coupon to the payment address specified on the statement or, generally, made via the "Transfers" tab or "Make a Payment" link on the credit card Account Activity tab of Wells Fargo Online Banking at www.wellsfargo.com. Conforming Payments received via mail by 5:00 p.m. will be credited as of the date of receipt. Conforming Payments received after 5:00 p.m. will be credited as of the next day. Cut-off times for Conforming Payments made via our Web site will be disclosed at the time of the transaction. "Non-Conforming Payments" are payments made by any other means and may not receive credit for up to five days after the date of receipt. Non-Conforming payments include, but are not limited to, placing the provided envelope and payment coupon in another envelope.

Notice About Electronic Check Conversion: When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

Payment in Full for Less Than Account Balance Request: If you intend to pay your account in full with an amount less than the total owed on your account, you must send your request to us at: P.O. Box 10311, Des Moines, IA 50306-0311. Such payments will not discharge your full debt.

How We Calculate Your Balance. We use a method called "average daily balance (including new purchases)". For more information regarding this calculation, please call our toll-free Customer Service number located on the front of this statement.

How to Avoid Paying Interest on Purchases. Your Payment Due Date is at least 25 days after the close of each billing period. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the transaction date.

Secured Accounts. For Secured accounts, your credit card account is secured by a pledge of your Secured Card Collateral Account with Wells Fargo Bank, N.A., established in connection with your application for the card. You agree that this pledge includes and gives the right to Bank to redeem, collect and withdraw any part or the full amount of the Secured Card Collateral Account upon any default under your Secured credit card agreement, or in the event your Secured credit card agreement is terminated by Bank for any reason. This pledge is given as a security interest for any and all amounts you owe, including interest, fees and costs which may accrue under your Secured credit card account. You agree that if your Secured credit card account is closed for any reason, the bank may apply funds in the Secured Card Collateral Account to pay off any balance on the credit card account. If there are still funds remaining in the Collateral Account after doing so, these funds may remain on deposit for up to 60 days before being remitted to you.

Customer Service Monitoring. Calls may be recorded or monitored.

INFORMACIÓN IMPORTANTE SOBRE SU CUENTA

Resumen de Derechos de Facturación. Si cree que hay algún error en su estado de cuenta (un "Error"), o si necesita más información sobre una transacción que aparece en su estado de cuenta, por favor escríbanos en una hoja separada tan pronto como le sea posible, a la siguiente dirección: P.O. Box 522, Des Moines, IA 50306-0522. Debe comunicarse con nosotros dentro de un lapso de 90 días de la fecha en que le hayamos enviado el primer estado de cuenta en que apareció el Error. Puede comunicarse con nosotros por otros medios (lo que incluye llamarnos al número que aparece en el frente del estado de cuenta) pero el hacerlo no preservará sus derechos.

En su carta (una "Notificación por Escrito"), por favor incluya la siguiente información:

- Su nombre y número de cuenta.
- La fecha y el monto en dólares del Error del que sospecha.
- Una descripción del Error y la razón por la cual usted cree que es un Error. Si necesita más información, por favor describa el ítem del que no está seguro.

No tiene que pagar el monto del supuesto Error mientras lo investiguemos, pero seguirá obligado a pagar las porciones del saldo de su cuenta que no formen parte del supuesto Error. Mientras investiguemos, no podremos reportarlo en calidad de deudor moroso, ni tomar medidas para cobrar el monto del supuesto Error. Si nos ha autorizado a pagar su cuenta de tarjeta de crédito de manera automática desde su cuenta de cheques o de ahorros, puede suspender el pago por cualquier monto que crea que es un Error. Para suspender el pago, su Notificación por Escrito debe llegarnos tres (3) días hábiles antes del día en que está programado el pago automático.

Regla Especial para Compras con Tarjeta de Crédito: Si usted tiene algún problema con la calidad de los bienes o servicios que adquirió con una tarjeta de crédito, y ha intentado de buena fe resolver el problema con el comerciante, quizá no tenga que pagar el monto restante adeudado por los bienes o servicios. Usted cuenta con esta protección solamente si el precio de compra superó a los \$50 y la compra fue realizada en el estado en que reside o a una distancia no superior a 100 millas de su dirección postal, y siempre que no haya pagado el saldo del cargo en disputa. Si somos los propietarios u operadores de dicho comercio, o si le enviamos por correo un anuncio publicitario de los bienes o servicios, todas las compras están cubiertas, sin importar el monto o lugar de la compra.

Información de Crédito. AVISO: Podremos dar información sobre su cuenta a las agencias de informes sobre consumidores. Usted tiene el derecho a cuestionar la exactitud de la información reportada por nosotros al escribir a la siguiente dirección: P.O. Box 14517, Des Moines, IA 50306-3517. En su carta, deberá describir la información específica que sea inexacta o en disputa, y fundamentar cualquier disputa con documentación de respaldo. Si considera que se trata de información relacionada con el robo de identidad, deberá enviarnos una denuncia de robo de identidad correspondiente.

Pagos. Los "Pagos en Conformidad" son pagos enviados con el sobre adjunto y talón de pago a la dirección de pago especificada en el estado de cuenta o en general a través de la ficha "Transfers" (sólo disponible en inglés) o "Make a Payment" en la ficha "Account Activity" (sólo disponible en inglés) de los servicios bancarios por Internet de Wells Fargo en www.wellsfargo.com. Los pagos en Conformidad recibidos por correo a más tardar a las 5 p.m. serán acreditados a la fecha de su recibo. Los Pagos en Conformidad recibidos después de las 5 p.m. serán acreditados al día siguiente. Las horas de límite para Pagos en Conformidad realizados a través de nuestro sitio Web serán reveladas al momento de la transacción. Los "Pagos en Incumplimiento" son pagos efectuados por cualquier otro medio y es posible que no reciban crédito durante hasta 5 días después de la fecha de recibo. Los Pagos en Incumplimiento incluyen, sin limitación, poner el sobre proporcionado y talón de pago en otro sobre.

Aviso Sobre Conversión de Cheques Electrónicos: Al proporcionar un cheque como forma de pago, usted nos da su autorización para utilizar la información de su cheque a fin de realizar una sola transferencia electrónica de su cuenta o procesar el pago como una transacción de cheque. Cuando nosotros usamos la información de su cheque para realizar una transferencia electrónica de fondos, los mismos podrán ser retirados de su cuenta tan rápido como el mismo día en que recibimos su pago, y su institución financiera no le regresará su cheque.

Pago Total por un Monto Inferior al Saldo de la Cuenta: Si usted piensa liquidar la totalidad del saldo de su cuenta por un monto inferior al monto total adeudado en su cuenta, deberá enviarnos su solicitud a la siguiente dirección: P.O. Box 10311, Des Moines, IA 50306-0311. Dichos pagos no cancelarán la totalidad de su deuda.

Cómo Calculamos Su Saldo. Usamos un método denominado "saldo diario promedio (incluyendo nuevas compras)". Para más información acerca de este cálculo, por favor llame a nuestro número gratuito de Servicio al Cliente indicado al frente de este estado de cuenta.

Cómo Evitar Pagar Intereses sobre Compras. La Fecha de Vencimiento del Pago es al menos 25 días después del cierre de cada periodo de facturación. No cargaremos intereses sobre las compras si usted paga la totalidad de su saldo a más tardar en la fecha de vencimiento de cada mes. Comenzaremos a cargar intereses sobre adelantos en efectivo y transferencias de saldo a la fecha de transacción.

Cuentas Garantizadas. Para Cuentas Garantizadas, su cuenta de tarjeta de crédito está garantizada por la entrega en prenda de su Cuenta Colateral de la Tarjeta Garantizada de Wells Fargo Bank N.A., establecida en relación con su solicitud de la tarjeta. Usted conviene en que esta entrega en prenda incluye y da al Banco el derecho a redimir, cobrar y retirar cualquier parte o la totalidad del monto depositado en la Cuenta Colateral de la Tarjeta Garantizada en caso de cualquier acto de incumplimiento bajo su convenio de la tarjeta de crédito garantizada, o en caso de que dicho convenio sea terminado por el Banco, por cualquier motivo. Esta prenda se entrega como garantía de cada uno y todos los montos que usted adeude, incluidos los intereses, cuotas y costos que puedan acumularse bajo su Cuenta de Tarjeta de Crédito Garantizada. Usted está de acuerdo en que si su Cuenta de Tarjeta de Crédito Garantizada se cierra por cualquier razón, el banco podrá aplicar los fondos mantenidos en la Cuenta Colateral de la Tarjeta Garantizada para liquidar cualquier saldo en la cuenta de tarjeta de crédito. Si después de hacerlo aún quedan fondos en la Cuenta Colateral, dichos fondos podrán permanecer en depósito durante hasta 60 días antes de que sean remitidos a usted.

Monitoreo del Servicio al Cliente. Las llamadas pueden ser grabadas o monitoreadas.

01DP5596 - 9 - 04/01/2015

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Change of Address Form – If your address has changed, provide your complete new address below. Be sure to check box on reverse side of coupon and enclose in the envelope provided. Please use this section only for address changes. If you have any questions, please call the toll-free customer service number on the front of this statement.

Formulario de Cambio de Dirección – Si su dirección ha cambiado, proporcione su nueva dirección completa abajo. Asegúrese de indicar el cuadro al dorso del cupón y adjúntelo en el sobre anexo. Por favor use esta sección solamente para cambios de dirección. Si tiene preguntas, por favor llame al número de Servicio al Cliente al frente de este estado de cuenta.

ACCOUNT FIRST NAME		ACCOUNT LAST NAME	
NEW STREET ADDRESS			
PO BOX/ APT #			
CITY, STATE/ZIP			
HOME PHONE		WORK PHONE	

RESP'T APP 2216

ER 000524

WELLS FARGO



Account Number
Statement Billing Period
Page 2 of 2

3984
01/23/2017 to 02/19/2017



Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Days in Billing Cycle	Interest Charge
PURCHASES	0.00%	\$0.00	28	\$0.00
CASH ADVANCES	0.00%	\$0.00	28	\$0.00

RESP'T APP 2217

ER 000525

WELLS FARGO

VISA

Account Number
Statement Billing Period
Page 1 of 23984
02/20/2017 to 03/22/2017WELLS
FARGO

Balance Summary

Previous Balance \$55.92
 - Payments \$409.51
 - Other Credits \$0.00
 + Cash Advances \$0.00
 + Purchases, Balance Transfers & Other Charges \$409.51
 + Fees Charged \$0.00
 + Interest Charged \$0.00
 = New Balance \$55.92

24-Hour Customer Service: 1-800-842-4720
 TTY for Hearing/Speech Impaired: 1-800-419-2265
 Outside the US Call Collect: 1-925-825-7600
 Wells Fargo Online®: wells Fargo.com

Send General Inquiries To:
 PO Box 10347, Des Moines IA, 50306-0347

Total Credit Limit \$5,000 Total Available Credit \$0

Payment Information

New Balance \$55.92
 Minimum Payment \$10.00
 Payment Due Date 04/16/2017

Send Payments To:
 PO Box 51193, Los Angeles CA, 90051-5493

Late Payment Warning: If we do not receive your Minimum Payment by 04/16/2017, you may have to pay a late fee up to \$0.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay ...	You will pay off the New Balance shown on this statement in about ...	And you will end up paying an estimated total of ...
Only the minimum payment	6 month(s)	\$56

If you would like information about credit counseling services, refer to www.usdoj.gov/ust/eo/bapcpa/ccde/cc_approved.htm or call 1-877-286-2108.

Transactions

Trans Post Reference Number Description Credits Charges
 & TRANSACTION WAS TRANSFERRED FROM LOST / STOLEN ACCOUNT

Payments

03/06 03/06 & F55830023000IXFRL PAYMENT - THANK YOU 409.51
 TOTAL PAYMENTS FOR THIS PERIOD \$409.51

Purchases, Balance Transfers & Other Charges

03/09 03/09 F55830024000TF068 PAYMENT ON 03/06/17 POSTED IN ERROR 409.51
 TOTAL PURCHASES, BALANCE TRANSFERS & OTHER CHARGES FOR THIS PERIOD \$409.51

Fees Charged

TOTAL FEES CHARGED FOR THIS PERIOD \$0.00

Interest Charged

INTEREST CHARGE ON PURCHASES 0.00
 INTEREST CHARGE ON CASH ADVANCES 0.00
 TOTAL INTEREST CHARGED FOR THIS PERIOD \$0.00

2017 Totals Year-to-Date

TOTAL FEES CHARGED IN 2017 \$0.00
 TOTAL INTEREST CHARGED IN 2017 \$0.00

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Continued

5596 YNG 1 3 14 170322 0 Z PAGE 1 of 2 10 5583 2000 CHGZ 01DP5596

Detach and mail with check payable to Wells Fargo

Account Number 4465 4204 9985 3984
 New Balance \$55.92
 Minimum Payment \$10.00
 Payment Due Date 04/16/2017

00005592000409510000100044654204998539846

Amount
Enclosed

ALECIA A KREMIDAS



WELLS FARGO CARD SERVICES
 PO BOX 51193
 LOS ANGELES CA 90051-5493


☐ Check here and see reverse for address and/or phone number correction.

ER 000526

IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Billing Rights Summary. If you believe your bill is wrong (an "Error"), or if you need more information about a transaction on your bill, write to us on a separate sheet of paper as soon as possible at: P.O. Box 522, Des Moines, IA 50306-0522. We must hear from you no later than 60 days after we sent you the first bill on which the Error appeared. You may notify us using other means (including calling us at the number listed on the front of the statement), but doing so will not preserve your rights.

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INFORMACIÓN IMPORTANTE SOBRE SU CUENTA

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En su carta (una "Notificación por Escrito"), por favor incluya la siguiente información:

- Su nombre y número de cuenta.
- La fecha y el monto en dólares del Error del que sospecha.
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No tiene que pagar el monto del supuesto Error mientras lo investiguemos, pero seguirá obligado a pagar las porciones del saldo de su cuenta que no formen parte del monto del supuesto Error. Mientras investiguemos, no podremos reportarlo en calidad de deudor moroso, ni tomar medidas para cobrar el monto del supuesto Error. Si nos ha autorizado a pagar su cuenta de tarjeta de crédito de manera automática desde su cuenta de cheques o de ahorros, puede suspender el pago por cualquier monto que crea que es un Error. Para suspender el pago, su Notificación por Escrito debe llegarnos tres (3) días hábiles antes del día en que esté programado el pago automático.

Regla Especial para Compras con Tarjeta de Crédito: Si usted tiene algún problema con la calidad de los bienes o servicios que adquirió con una tarjeta de crédito, y ha intentado de buena fe resolver el problema con el comerciante, quizá no tenga que pagar el monto restante adeudado por los bienes o servicios. Usted cuenta con esta protección solamente si el precio de compra superó a los \$50 y la compra fue realizada en el estado en que reside o a una distancia no superior a 100 millas de su dirección postal, y siempre que no haya pagado el saldo del cargo en disputa. Si somos los propietarios u operadores de dicho comercio, o si le enviamos por correo un anuncio publicitario de los bienes o servicios, todas las compras están cubiertas, sin importar el monto o lugar de la compra.

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Pagos. Los "Pagos en Conformidad" son pagos enviados con el sobre adjunto y talón de pago a la dirección de pago especificada en el estado de cuenta o en general a través de la ficha "Transfers" (sólo disponible en inglés) o "Make a Payment" en la ficha "Account Activity" (www.wellsfargo.com) en inglés en www.wellsfargo.com. Los Pagos en Conformidad recibidos por correo a más tardar a las 5 p.m. serán acreditados a la fecha de su recibo. Los Pagos en Conformidad recibidos después de las 5 p.m. serán acreditados al día siguiente. Las horas de límite para Pagos en Conformidad realizados a través de nuestro sitio Web serán reveladas al momento de la transacción. Los "Pagos en Incumplimiento" son pagos efectuados por cualquier otro medio y es posible que no reciban crédito durante hasta 5 días después de la fecha de recibo. Los Pagos en Incumplimiento incluyen, sin limitación, poner el sobre proporcionado y talón de pago en otro sobre.

Aviso Sobre Conversión de Cheques Electrónicos: Al proporcionar un cheque como forma de pago, usted nos da su autorización para utilizar la información de su cheque a fin de realizar una sola transferencia electrónica de su cuenta o procesar el pago como una transacción de cheque. Cuando nosotros usamos la información de su cheque para realizar una transferencia electrónica de fondos, los mismos podrán ser retirados de su cuenta tan rápido como el mismo día en que recibamos su pago, y su institución financiera no le regresará su cheque.

Pago Total por un Monto Inferior al Saldo de la Cuenta: Si usted piensa liquidar la totalidad del saldo de su cuenta por un monto inferior al monto total adeudado en su cuenta, deberá enviarnos su solicitud a la siguiente dirección: P.O. Box 10311, Des Moines, IA 50306-0311. Dichos pagos no cancelarán la totalidad de su deuda.

Cómo Calculamos Su Saldo. Usamos un método denominado "saldo diario promedio (incluyendo nuevas compras)". Para más información acerca de este cálculo, por favor llame a nuestro número gratuito de Servicio al Cliente indicado al frente de este estado de cuenta.

Cómo Evitar Pagar Intereses sobre Compras. La Fecha de Vencimiento del Pago es al menos 25 días después del cierre de cada periodo de facturación. No cargaremos intereses sobre las compras si usted paga la totalidad de su saldo a más tardar en la fecha de vencimiento de cada mes. Comenzaremos a cargar intereses sobre adelantos de saldo a la fecha de transacción.

Cuentas Garantizadas. Para Cuentas Garantizadas, su cuenta de tarjeta de crédito está garantizada por la entrega en prenda de su Cuenta Colateral de la Tarjeta Garantizada de Wells Fargo Bank N.A., establecida en relación con su solicitud de la tarjeta. Usted conviene en que esta entrega en prenda incluye y da al Banco el derecho a redimir, cobrar y retirar cualquier parte o la totalidad del monto depositado en la Cuenta Colateral de la Tarjeta Garantizada en caso de cualquier acto de incumplimiento bajo su convenio de la tarjeta de crédito garantizada, o en caso de que dicho convenio sea terminado por el Banco, por cualquier motivo. Esta prenda se entrega como garantía de cada uno y todos los montos que usted adeuda, incluidos los intereses, cuotas y costos que pueden acumularse bajo su Cuenta de Crédito Garantizada. Usted está de acuerdo en que si su Cuenta de Tarjeta de Crédito Garantizada se cierra por cualquier razón, el banco podrá aplicar los fondos mantenidos en la Cuenta Colateral de la Tarjeta Garantizada para liquidar cualquier saldo en la cuenta de tarjeta de crédito. Si después de hacerlo aún quedan fondos en la Cuenta Colateral, dichos fondos podrán permanecer en depósito durante hasta 60 días antes de que sean remitidos a usted.

Monitoreo del Servicio al Cliente. Las llamadas pueden ser grabadas o monitoreadas.

01DP5566 - 9 - 04/01/2015

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Change of Address Form – If your address has changed, provide your complete new address below. Be sure to check box on reverse side of coupon and enclose in the envelope provided. Please use this section only for address changes. If you have any questions, please call the toll-free customer service number on the front of this statement.

Formulario de Cambio de Dirección – Si su dirección ha cambiado, proporcione su nueva dirección completa abajo. Asegúrese de indicar el cuadro al dorso del cupón y adjúntelo en el sobre anexo. Por favor use esta sección solamente para cambios de dirección. Si tiene preguntas, por favor llame al número de Servicio al Cliente al frente de este estado de cuenta.

ACCOUNT FIRST NAME	ACCOUNT LAST NAME
NEW STREET ADDRESS	
PO BOX/ APT #	
CITY, STATE/ZIP	
HOME PHONE	WORK PHONE

RESP'T APP 2219

ER 000527

WELLS FARGO

VISA

Account Number
Statement Billing Period
Page 2 of 2

1984
02/20/2017 to 03/22/2017

WELLS
FARGO

Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Days in Billing Cycle	Interest Charge
PURCHASES	0.00%	\$0.00	31	\$0.00
CASH ADVANCES	0.00%	\$0.00	31	\$0.00

RESP'T APP 2220

ER 000528

WELLS FARGO

VISA

Account Number
Statement Billing Period
Page 1 of 2984
03/23/2017 to 04/21/2017WELLS
FARGO

Balance Summary

Previous Balance \$55.92
 - Payments \$14.99
 - Other Credits \$0.00
 + Cash Advances \$0.00
 + Purchases, Balance Transfers & Other Charges \$14.99
 + Fees Charged \$0.00
 + Interest Charged \$0.00
 = New Balance \$55.92

24-Hour Customer Service: 1-800-642-4720
 TTY for Hearing/Speech Impaired: 1-800-419-2265
 Outside the US Call Collect: 1-925-825-7600
 Wells Fargo Online®: wells Fargo.com

Send General Inquiries To:
 PO Box 10347, Des Moines IA, 50306-0347

Total Credit Limit

\$5,000

Total Available Credit

\$0

Payment Information

New Balance \$55.92
 Minimum Payment \$10.00
 Payment Due Date 05/16/2017

Send Payments To:
 PO Box 51193, Los Angeles CA, 90051-5493

Late Payment Warning: If we do not receive your Minimum Payment by 05/16/2017, you may have to pay a late fee up to \$0.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay ...	You will pay off the New Balance shown on this statement in about ...	And you will end up paying an estimated total of ...
Only the minimum payment	6 month(s)	\$56

If you would like information about credit counseling services, refer to www.usdoj.gov/ust/eo/bapcpa/ccde/cc_approved.htm or call 1-877-285-2108.

Transactions

Trans	Post	Reference Number	Description	Credits	Charges
& TRANSACTION WAS TRANSFERRED FROM LOST / STOLEN ACCOUNT					

Payments

03/29	03/29	& F5583002U000IXFRL	PAYMENT - THANK YOU	14.99	
TOTAL PAYMENTS FOR THIS PERIOD				\$14.99	

Purchases, Balance Transfers & Other Charges

04/03	04/03	F5583002X000TF093	PAYMENT ON 03/29/17 POSTED IN ERROR		14.99
TOTAL PURCHASES, BALANCE TRANSFERS & OTHER CHARGES FOR THIS PERIOD					\$14.99

Fees Charged

TOTAL FEES CHARGED FOR THIS PERIOD	\$0.00
------------------------------------	--------

Interest Charged

INTEREST CHARGE ON PURCHASES	0.00
INTEREST CHARGE ON CASH ADVANCES	0.00
TOTAL INTEREST CHARGED FOR THIS PERIOD	\$0.00

2017 Totals Year-to-Date

TOTAL FEES CHARGED IN 2017	\$0.00
TOTAL INTEREST CHARGED IN 2017	\$0.00

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Continued

5596 YKG 1 3 14 170421 0 Z PAGE 1 of 2 10 5583 2000 CHGZ 01DP5596

Detach and mail with check payable to Wells Fargo

Account Number 4465 4204 9985 3984
 New Balance \$55.92
 Minimum Payment \$10.00
 Payment Due Date 05/16/2017

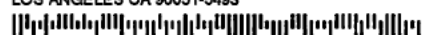
00005592000014990000100044654204998539843

Amount
Enclosed

ALECIA A KREMIDAS



WELLS FARGO CARD SERVICES
 PO Box 51193
 LOS ANGELES CA 90051-5493


☐ Check here and see reverse for address and/or phone number correction.

ER 000529

IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Billing Rights Summary. If you believe your bill is wrong (an "Error"), or if you need more information about a transaction on your bill, write to us on a separate sheet of paper as soon as possible at: P.O. Box 522, Des Moines, IA 50306-0522. We must hear from you no later than 60 days after we sent you the first bill on which the Error appeared. You may notify us using other means (including calling us at the number listed on the front of the statement), but doing so will not preserve your rights.

In your letter (a "Written Notice"), provide the following information:

- Your name and account number.
- The date and dollar amount of suspected Error.
- Description of the Error and why you believe there is an Error. If you need more information, please describe the item you are not sure about.

You do not have to pay any alleged Error amount while we are investigating, but you are still obligated to pay the parts of your bill that are not part of the alleged Error amount. While we investigate, we cannot report you as delinquent or take any action to collect the alleged Error amount. If you have authorized us to pay your credit card bill automatically from your savings or checking account, you can stop the payment on any amount you believe is an Error. To stop the payment, your Written Notice must reach us three (3) business days before the automatic payment is scheduled to occur.

Special Rule for Credit Card Purchases: If you have a problem with the quality of goods or services you purchased with a credit card, and you have tried in good faith to correct the problem with the merchant, you may not have to pay the remaining amount due on the goods or services. You have this protection only when the purchase price was more than \$50 and the purchase was made in your home state or within 100 miles of your mailing address and you have not paid the balance of the disputed charge. If we own or operate the merchant, or if we mailed you the advertisement for the property or services, all purchases are covered regardless of amount or location of purchase.

Credit Information. NOTICE: We may furnish information about your account to consumer reporting agencies. You have the right to dispute the accuracy of information that we have reported by writing to us at P.O. Box 14517, Des Moines, IA 50306-3517 and describing the specific information that is inaccurate or in dispute and the basis for any dispute with supporting documentation. In the case of information that you believe relates to an identity theft, you will need to provide us with an identity theft report.

Payments. "Conforming Payments" are payments mailed using the enclosed envelope and payment coupon to the payment address specified on the statement or, generally, made via the "Transfers" tab or "Make a Payment" link on the credit card Account Activity tab of Wells Fargo Online Banking at www.wellsfargo.com. Conforming Payments received via mail by 5:00 p.m. will be credited as of the date of receipt. Conforming Payments received after 5:00 p.m. will be credited as of the next day. Cut-off times for Conforming Payments made via our Web site will be disclosed at the time of the transaction. "Non-Conforming Payments" are payments made by any other means and may not receive credit for up to five days after the date of receipt. Non-Conforming payments include, but are not limited to, placing the provided envelope and payment coupon in another envelope.

Notice About Electronic Check Conversion: When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

Payment in Full for Less Than Account Balance Request: If you intend to pay your account in full with an amount less than the total owed on your account, you must send your request to us at: P.O. Box 10311, Des Moines, IA 50306-0311. Such payments will not discharge your full debt.

How We Calculate Your Balance. We use a method called "average daily balance (including new purchases)". For more information regarding this calculation, please call our toll-free Customer Service number located on the front of this statement.

How to Avoid Paying Interest on Purchases. Your Payment Due Date is at least 25 days after the close of each billing period. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the transaction date.

Secured Accounts. For Secured accounts, your credit card account is secured by a pledge of your Secured Card Collateral Account with Wells Fargo Bank, N.A., established in connection with your application for the card. You agree that this pledge includes and gives the right to Bank to redeem, collect and withdraw any part or the full amount of the Secured Card Collateral Account upon any default under your Secured credit card agreement, or in the event your Secured credit card agreement is terminated by Bank for any reason. This pledge is given as a security interest for any and all amounts you owe, including interest, fees and costs which may accrue under your Secured credit card account. You agree that if your Secured credit card account is closed for any reason, the bank may apply funds in the Secured Card Collateral Account to pay off any balance on the credit card account. If there are still funds remaining in the Collateral Account after doing so, these funds may remain on deposit for up to 60 days before being remitted to you.

Customer Service Monitoring. Calls may be recorded or monitored.

INFORMACIÓN IMPORTANTE SOBRE SU CUENTA

Resumen de Derechos de Facturación. Si cree que hay algún error en su estado de cuenta (un "Error"), o si necesita más información sobre una transacción que aparece en su estado de cuenta, por favor escríbanos en una hoja separada tan pronto como le sea posible, a la siguiente dirección: P.O. Box 522, Des Moines, IA 50306-0522. Debe comunicarse con nosotros dentro de un lapso de 60 días de la fecha en que le hayamos enviado el primer estado de cuenta en que apareció el Error. Puede comunicarse con nosotros por otros medios (lo que incluye llamarnos al número que aparece en el frente del estado de cuenta) pero al hacerlo no preservará sus derechos.

En su carta (una "Notificación por Escrito"), por favor incluya la siguiente información:

- Su nombre y número de cuenta.
- La fecha y el monto en dólares del Error del que sospecha.
- Una descripción del Error y la razón por la cual usted cree que es un Error. Si necesita más información, por favor describa el ítem del que no está seguro.

No tiene que pagar el monto del supuesto Error mientras lo investiguemos, pero seguirá obligado a pagar las porciones del saldo de su cuenta que no formen parte del monto del supuesto Error. Mientras investiguemos, no podremos reportarlo en calidad de deudor moroso, ni tomar medidas para cobrar el monto del supuesto Error. Si nos ha autorizado a pagar su cuenta de tarjeta de crédito de manera automática desde su cuenta de cheques o de ahorros, puede suspender el pago por cualquier monto que crea que es un Error. Para suspender el pago, su Notificación por Escrito debe llegarnos tres (3) días hábiles antes del día en que esté programado el pago automático.

Regla Especial para Compras con Tarjeta de Crédito: Si usted tiene algún problema con la calidad de los bienes o servicios que adquirió con una tarjeta de crédito, y ha intentado de buena fe resolver el problema con el comerciante, quizá no tenga que pagar el monto restante adeudado por los bienes o servicios. Usted cuenta con esta protección solamente si el precio de compra superó a los \$50 y la compra fue realizada en el estado en que reside o a una distancia no superior a 100 millas de su dirección postal, y siempre que no haya pagado el saldo del cargo en disputa. Si somos los propietarios u operadores de dicho comercio, o si le enviamos por correo un anuncio publicitario de los bienes o servicios, todas las compras están cubiertas, sin importar el monto o lugar de la compra.

Información de Crédito. AVISO: Podremos dar información sobre su cuenta a las agencias de informes sobre consumidores. Usted tiene el derecho a cuestionar la exactitud de la información reportada por nosotros al escribir a la siguiente dirección: P.O. Box 14517, Des Moines, IA 50306-3517. En su carta, deberá describir la información específica que sea inexacta o en disputa, y fundamentar cualquier disputa con documentación de respaldo. Si considera que se trata de información relacionada con el robo de identidad, deberá enviarnos una denuncia de robo de identidad correspondiente.

Pagos. Los "Pagos en Conformidad" son pagos enviados con el sobre adjunto y talón de pago a la dirección de pago especificada en el estado de cuenta o en general a través de la ficha "Transfers" (sólo disponible en inglés) o "Make a Payment" en la ficha "Account Activity" (sólo disponible en inglés) de los servicios bancarios por Internet de Wells Fargo en www.wellsfargo.com. Los Pagos en Conformidad recibidos por correo a más tardar a las 5 p.m. serán acreditados a la fecha de su recibo. Los Pagos en Conformidad recibidos después de las 5 p.m. serán acreditados al día siguiente. Las horas de límite para Pagos en Conformidad realizados a través de nuestro sitio Web serán reveladas al momento de la transacción. Los "Pagos en Incumplimiento" son pagos efectuados por cualquier otro medio y es posible que no reciban crédito durante hasta 5 días después de la fecha de recibo. Los Pagos en Incumplimiento incluyen, sin limitación, poner el sobre proporcionado y talón de pago en otro sobre.

Aviso Sobre Conversión de Cheques Electrónicos: Al proporcionar un cheque como forma de pago, usted nos da su autorización para utilizar la información de su cheque a fin de realizar una sola transferencia electrónica de su cuenta o procesar el pago como una transacción de cheque. Cuando nosotros usamos la información de su cheque para realizar una transferencia electrónica de fondos, los mismos podrán ser retirados de su cuenta tan rápido como el mismo día en que recibamos su pago, y su institución financiera no le regresará su cheque.

Pago Total por un Monto Inferior al Saldo de la Cuenta: Si usted piensa liquidar la totalidad del saldo de su cuenta por un monto inferior al monto total adeudado en su cuenta, deberá enviarnos su solicitud a la siguiente dirección: P.O. Box 10311, Des Moines, IA 50306-0311. Dichos pagos no cancelarán la totalidad de su deuda.

Cómo Calculamos Su Saldo. Usamos un método denominado "saldo diario promedio (incluyendo nuevas compras)". Para más información acerca de este cálculo, por favor llame a nuestro número gratuito de Servicio al Cliente indicado al frente de este estado de cuenta.

Cómo Evitar Pagar Intereses sobre Compras. La Fecha de Vencimiento del Pago es al menos 25 días después del cierre de cada periodo de facturación. No cargaremos intereses sobre las compras si usted paga la totalidad de su saldo a más tardar en la fecha de vencimiento de cada mes. Comenzaremos a cargar intereses sobre adelantos en efectivo y transferencias de saldo a la fecha de transacción.

Cuentas Garantizadas. Para Cuentas Garantizadas, su cuenta de tarjeta de crédito está garantizada por la entrega en prenda de su Cuenta Colateral de la Tarjeta Garantizada de Wells Fargo Bank N.A., establecida en relación con su solicitud de la tarjeta. Usted conviene en que esta entrega en prenda incluye y da al Banco el derecho a redimir, cobrar y retirar cualquier parte o la totalidad del monto depositado en la Cuenta Colateral de la Tarjeta Garantizada en caso de cualquier acto de incumplimiento bajo su convenio de la tarjeta de crédito garantizada, o en caso de que dicho convenio sea terminado por el Banco, por cualquier motivo. Esta prenda se entrega como garantía de cada uno y todos los montos que usted adeude, incluidos los intereses, cuotas y costos que pueden acumularse bajo su Cuenta de Tarjeta de Crédito Garantizada. Usted está de acuerdo en que si su Cuenta de Tarjeta de Crédito Garantizada se cierra por cualquier razón, el banco podrá aplicar los fondos mantenidos en la Cuenta Colateral de la Tarjeta Garantizada para liquidar cualquier saldo en la cuenta de tarjeta de crédito. Si después de hacerlo aún quedan fondos en la Cuenta Colateral, dichos fondos podrán permanecer en depósito durante hasta 60 días antes de que sean remitidos a usted.

Monitoreo del Servicio al Cliente. Las llamadas pueden ser grabadas o monitoreadas.

01DP5596 - 9 - 04/01/2015

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Change of Address Form – If your address has changed, provide your complete new address below. Be sure to check box on reverse side of coupon and enclose in the envelope provided. Please use this section only for address changes. If you have any questions, please call the toll-free customer service number on the front of this statement.

Formulario de Cambio de Dirección – Si su dirección ha cambiado, proporcione su nueva dirección completa abajo. Asegúrese de indicar el cuadro al dorso del cupón y adjúntelo en el sobre anexo. Por favor use esta sección solamente para cambios de dirección. Si tiene preguntas, por favor llame al número de Servicio al Cliente al frente de este estado de cuenta.

ACCOUNT FIRST NAME	ACCOUNT LAST NAME
NEW STREET ADDRESS	
PO BOX/ APT #	
CITY, STATE/ZIP	
HOME PHONE	WORK PHONE

RESP'T APP 2222

ER 000530

WELLS FARGO



Account Number
Statement Billing Period
Page 2 of 2

884
03/23/2017 to 04/21/2017



Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Days in Billing Cycle	Interest Charge
PURCHASES	0.00%	\$0.00	30	\$0.00
CASH ADVANCES	0.00%	\$0.00	30	\$0.00

RESP'T APP 2223

WELLS FARGO

VISA

Account Number
Statement Billing Period
Page 1 of 2984
04/22/2017 to 05/22/2017WELLS
FARGO

Balance Summary

Previous Balance \$55.92
 - Payments \$8.57
 - Other Credits \$0.00
 + Cash Advances \$0.00
 + Purchases, Balance Transfers & Other Charges \$8.57
 + Fees Charged \$0.00
 + Interest Charged \$0.00
 = New Balance \$55.92

24-Hour Customer Service: 1-800-642-4720
 TTY for Hearing/Speech Impaired: 1-800-419-2265
 Outside the US Call Collect: 1-925-825-7600
 Wells Fargo Online®: wells Fargo.com

Send General Inquiries To:
 PO Box 10347, Des Moines IA, 50306-0347

Total Credit Limit

\$5,000

Total Available Credit

\$0

Payment Information

New Balance \$55.92
 Minimum Payment \$11.43

Send Payments To:
 PO Box 51193, Los Angeles CA, 90051-5493

(Includes Past Due Amount of \$1.43)

Payment Due Date

06/16/2017

Late Payment Warning: If we do not receive your Minimum Payment by 06/16/2017, you may have to pay a late fee up to \$0.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay ...	You will pay off the New Balance shown on this statement in about ...	And you will end up paying an estimated total of ...
Only the minimum payment	6 month(s)	\$56

If you would like information about credit counseling services, refer to www.usdoj.gov/ust/eo/bapcpa/ccde/cc_approved.htm or call 1-877-285-2108.

Transactions

Trans	Post	Reference Number	Description	Credits	Charges
-------	------	------------------	-------------	---------	---------

& TRANSACTION WAS TRANSFERRED FROM LOST / STOLEN ACCOUNT

Payments

05/04	05/04	& F5583003Z000IXFRL	PAYMENT - THANK YOU	8.57	
TOTAL PAYMENTS FOR THIS PERIOD				\$8.57	

Purchases, Balance Transfers & Other Charges

05/08	05/08	F55830040000TF128	PAYMENT ON 05/04/17 POSTED IN ERROR		8.57
TOTAL PURCHASES, BALANCE TRANSFERS & OTHER CHARGES FOR THIS PERIOD					\$8.57

Fees Charged

TOTAL FEES CHARGED FOR THIS PERIOD	\$0.00
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Interest Charged

INTEREST CHARGE ON PURCHASES	0.00
INTEREST CHARGE ON CASH ADVANCES	0.00
TOTAL INTEREST CHARGED FOR THIS PERIOD	\$0.00

2017 Totals Year-to-Date

TOTAL FEES CHARGED IN 2017	\$0.00
TOTAL INTEREST CHARGED IN 2017	\$0.00

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Continued

5596 YKG 1 3 14 170522 0 ZD PAGE 1 OF 2 10 5583 2000 CHGZ O1DP5596

Detach and mail with check payable to Wells Fargo

Account Number 4465 4204 9985 3984
 New Balance \$55.92
 Minimum Payment \$11.43
 (Includes Past Due Amount of \$1.43)
 Payment Due Date 06/16/2017

00005592000008570000114344654204998539841

Amount
Enclosed

ALECIA A KREMIDAS



WELLS FARGO CARD SERVICES
 PO Box 51193
 LOS ANGELES CA 90051-5493
 RESPT APP 2224


☐ Check here and see reverse for address and/or phone number correction.

ER 000532

IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Billing Rights Summary. If you believe your bill is wrong (an "Error"), or if you need more information about a transaction on your bill, write to us on a separate sheet of paper as soon as possible at: P.O. Box 522, Des Moines, IA 50306-0522. We must hear from you no later than 60 days after we sent you the first bill on which the Error appeared. You may notify us using other means (including calling us at the number listed on the front of the statement), but doing so will not preserve your rights.

In your letter (a "Written Notice"), provide the following information:

- Your name and account number.
- The date and dollar amount of suspected Error.
- Description of the Error and why you believe there is an Error. If you need more information, please describe the item you are not sure about.

You do not have to pay any alleged Error amount while we are investigating, but you are still obligated to pay the parts of your bill that are not part of the alleged Error amount. While we investigate, we cannot report you as delinquent or take any action to collect the alleged Error amount. If you have authorized us to pay your credit card bill automatically from your savings or checking account, you can stop the payment on any amount you believe is an Error. To stop the payment, your Written Notice must reach us three (3) business days before the automatic payment is scheduled to occur.

Special Rule for Credit Card Purchases: If you have a problem with the quality of goods or services you purchased with a credit card, and you have tried in good faith to correct the problem with the merchant, you may not have to pay the remaining amount due on the goods or services. You have this protection only when the purchase price was more than \$50 and the purchase was made in your home state or within 100 miles of your mailing address and you have not paid the balance of the disputed charge. If we own or operate the merchant, or if we mailed you the advertisement for the property or services, all purchases are covered regardless of amount or location of purchase.

Credit Information. NOTICE: We may furnish information about your account to consumer reporting agencies. You have the right to dispute the accuracy of information that we have reported by writing to us at P.O. Box 14517, Des Moines, IA 50306-3517 and describing the specific information that is inaccurate or in dispute and the basis for any dispute with supporting documentation. In the case of information that you believe relates to an identity theft, you will need to provide us with an identity theft report.

Payments. "Conforming Payments" are payments mailed using the enclosed envelope and payment coupon to the payment address specified on the statement or, generally, made via the "Transfers" tab or "Make a Payment" link on the credit card Account Activity tab of Wells Fargo Online Banking at www.wellsfargo.com. Conforming Payments received via mail by 5:00 p.m. will be credited as of the date of receipt. Conforming Payments received after 5:00 p.m. will be credited as of the next day. Cut-off times for Conforming Payments made via our Web site will be disclosed at the time of the transaction. "Non-Conforming Payments" are payments made by any other means and may not receive credit for up to five days after the date of receipt. Non-Conforming payments include, but are not limited to, placing the provided envelope and payment coupon in another envelope.

Notice About Electronic Check Conversion: When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

Payment in Full for Less Than Account Balance Request: If you intend to pay your account in full with an amount less than the total owed on your account, you must send your request to us at: P.O. Box 10311, Des Moines, IA 50306-0311. Such payments will not discharge your full debt.

How We Calculate Your Balance. We use a method called "average daily balance (including new purchases)". For more information regarding this calculation, please call our toll-free Customer Service number located on the front of this statement.

How to Avoid Paying Interest on Purchases. Your Payment Due Date is at least 25 days after the close of each billing period. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the transaction date.

Secured Accounts. For Secured accounts, your credit card account is secured by a pledge of your Secured Card Collateral Account with Wells Fargo Bank, N.A., established in connection with your opening of the card. You agree that this pledge includes and gives the right to Bank to redeem, collect and withdraw any part or the full amount of the Secured Card Collateral Account upon any default under your Secured credit card agreement, or in the event your Secured credit card agreement is terminated by Bank for any reason. This pledge is given as a security interest for any and all amounts you owe, including interest, fees and costs which may accrue under your Secured credit card account. You agree that if your Secured credit card account is closed for any reason, the bank may apply funds in the Secured Card Collateral Account to pay off any balance on the credit card account. If there are still funds remaining in the Collateral Account after doing so, these funds may remain on deposit for up to 60 days before being remitted to you.

Customer Service Monitoring. Calls may be recorded or monitored.

INFORMACIÓN IMPORTANTE SOBRE SU CUENTA

Resumen de Derechos de Facturación. Si cree que hay algún error en su estado de cuenta (un "Error"), o si necesita más información sobre una transacción que aparece en su estado de cuenta, por favor escríbanos en una hoja separada tan pronto como le sea posible, a la siguiente dirección: P.O. Box 522, Des Moines, IA 50306-0522. Debe comunicarse con nosotros dentro de un lapso de 60 días de la fecha en que le fué enviado el primer estado de cuenta en que apareció el Error. Puedo comunicarse con nosotros por otros medios (lo que incluye llamarnos al número que aparece en el frente del estado de cuenta) pero al hacerlo no preservará sus derechos.

En su carta (una "Notificación por Escrito"), por favor incluya la siguiente información:

- Su nombre y número de cuenta.
- La fecha y el monto en dólares del Error del que sospecha.
- Una descripción del Error y la razón por la cual usted cree que es un Error. Si necesita más información, por favor describa el ítem del que no está seguro.

No tiene que pagar el monto del supuesto Error mientras lo investiguemos, pero seguirá obligado a pagar las porciones del saldo de su cuenta que no formen parte del monto del supuesto Error. Mientras investiguemos, no podremos reportarlo en calidad de deudor moroso, ni tomar medidas para cobrar el monto del supuesto Error. Si nos ha autorizado a pagar su cuenta de tarjeta de crédito de manera automática desde su cuenta de cheques o de ahorros, puede suspender el pago por cualquier monto que crea que es un Error. Para suspender el pago, su Notificación por Escrito debe llegarnos tres (3) días hábiles antes del día en que esté programado el pago automático.

Regla Especial para Compras con Tarjeta de Crédito: Si usted tiene algún problema con la calidad de los bienes o servicios que adquirió con una tarjeta de crédito, y ha intentado de buena fe resolver el problema con el comerciante, quizá no tenga que pagar el monto restante adeudado por los bienes o servicios. Usted cuenta con esta protección solamente si el precio de compra superó a los \$50 y la compra fue realizada en el estado en que residio o a una distancia no superior a 100 millas de su dirección postal, y siempre que no haya pagado el saldo del cargo en disputa. Si somos los propietarios u operadores de dicho comercio, o si le enviamos por correo un anuncio publicitario de los bienes o servicios, todas las compras están cubiertas, sin importar el monto o lugar de la compra.

Información de Crédito. AVISO: Podemos dar información sobre su cuenta a las agencias de informes sobre consumidores. Usted tiene el derecho a cuestionar la exactitud de la información reportada por nosotros al escribir a la siguiente dirección: P.O. Box 14517, Des Moines, IA 50306-3517. En su carta, deberá describir la información específica que sea inexacta o en disputa, y fundamentar cualquier disputa con documentación de respaldo. Si considera que se trata de información relacionada con el robo de identidad, deberá enviarnos una denuncia de robo de identidad correspondiente.

Pagos. Los "Pagos en Conformidad" son pagos enviados con el sobre adjunto y talón de pago a la dirección de pago especificada en el estado de cuenta o en general a través de la ficha "Transfers" (que disponible en inglés o "Make a Payment" en la ficha "Account Activity" (que disponible en inglés) de los servicios en línea por Internet de Wells Fargo en www.wellsfargo.com. Los Pagos en Conformidad recibidos por correo a más tardar a las 5 p.m. serán acreditados a la fecha de su recibo. Los Pagos en Conformidad recibidos después de las 5 p.m. serán acreditados al día siguiente. Las horas de límite para Pagos en Conformidad realizados a través de nuestro sitio Web serán reveladas al momento de la transacción. Los "Pagos en Incumplimiento" son pagos efectuados por cualquier otro medio y es posible que no reciban crédito durante hasta 5 días después de la fecha de recibo. Los Pagos en Incumplimiento incluyen, sin limitación, poner el sobre proporcionado y talón de pago en otro sobre.

Aviso Sobre Conversión de Cheques Electrónicos: Al proporcionar un cheque como forma de pago, usted nos da su autorización para utilizar la información de su cheque a fin de realizar una sola transferencia electrónica de su cuenta o procesar el pago como una transacción de cheque. Cuando nosotros usamos la información de su cheque para realizar una transferencia electrónica de fondos, los mismos podrán ser retirados de su cuenta tan rápido como el mismo día en que recibamos su pago, y su institución financiera no le regresará su cheque.

Pago Total por un Monto Inferior al Saldo de la Cuenta: Si usted piensa liquidar la totalidad del saldo de su cuenta por un monto inferior al monto total adeudado en su cuenta, deberá enviarnos su solicitud a la siguiente dirección: P.O. Box 10311, Des Moines, IA 50306-0311. Dichos pagos no cancelarán la totalidad de su deuda.

Cómo Calculamos Su Saldo. Usamos un método denominado "saldo diario promedio (incluyendo nuevas compras)". Para más información acerca de este cálculo, por favor llame a nuestro número gratuito de Servicio al Cliente indicado al frente de este estado de cuenta.

Cómo Evitar Pagar Intereses sobre Compras. La Fecha de Vencimiento del Pago es al menos 25 días después del cierre de cada periodo de facturación. No cargaremos intereses sobre las compras si usted paga la totalidad de su saldo a más tardar en la fecha de vencimiento de cada mes. Comenzaremos a cargar intereses sobre adeudos en efectivo y transferencias de saldo a la fecha de transacción.

Cuentas Garantizadas. Para Cuentas Garantizadas, su cuenta de tarjeta de crédito está garantizada por la entrega en prenda de su Cuenta Colateral de la Tarjeta Garantizada de Wells Fargo Bank N.A., establecida en relación con su solicitud de la tarjeta. Usted conviene en que esta entrega en prenda incluye y da al Banco el derecho a redimir, cobrar y retirar cualquier parte o la totalidad del monto depositado en la Cuenta Colateral de la Tarjeta Garantizada en caso de cualquier acto de incumplimiento bajo su convenio de la tarjeta de crédito garantizada, o en caso de que dicho convenio sea terminado por el Banco, por cualquier motivo. Esta prenda se entrega como garantía de cada una y todos los montos que usted adeude, incluya los intereses, cuotas y costas que puedan acumularse bajo su Cuenta de Tarjeta de Crédito Garantizada. Usted está de acuerdo en que si su Cuenta de Tarjeta de Crédito Garantizada se cierra por cualquier razón, el banco podrá aplicar los fondos mantenidos en la Cuenta Colateral de la Tarjeta Garantizada para liquidar cualquier saldo en la cuenta de tarjeta de crédito. Si después de hacerlo aún quedan fondos en la Cuenta Colateral, dichos fondos podrán permanecer en depósito durante hasta 60 días antes de que sean remitidos a usted.

Monitoreo del Servicio al Cliente. Las llamadas pueden ser grabadas o monitoreadas.

01DP5596 - 9 - 04/01/2015

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Change of Address Form – If your address has changed, provide your complete new address below. Be sure to check box on reverse side of coupon and enclose in the envelope provided. Please use this section only for address changes. If you have any questions, please call the toll-free customer service number on the front of this statement.

Formulario de Cambio de Dirección – Si su dirección ha cambiado, proporcione su nueva dirección completa abajo. Asegúrese de indicar el cuadro al dorso del cupón y adjúntelo en el sobre anexo. Por favor use esta sección solamente para cambios de dirección. Si tiene preguntas, por favor llame al número de Servicio al Cliente al frente de este estado de cuenta.

ACCOUNT FIRST NAME	ACCOUNT LAST NAME
NEW STREET ADDRESS	
PO BOX/ APT #	
CITY, STATE/ZIP	
HOME PHONE	WORK PHONE

RESP'T APP 2225

ER 000533

WELLS FARGO



Account Number
Statement Billing Period
Page 2 of 2

3984
04/22/2017 to 05/22/2017



Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Days in Billing Cycle	Interest Charge
PURCHASES	0.00%	\$0.00	31	\$0.00
CASH ADVANCES	0.00%	\$0.00	31	\$0.00

RESP'T APP 2226

WELLS FARGO

VISA

Account Number
Statement Billing Period
Page 1 of 23984
06/22/2017 to 07/21/2017WELLS
FARGO

Balance Summary

Previous Balance \$55.92
 - Payments \$1,000.00
 - Other Credits \$0.00
 + Cash Advances \$0.00
 + Purchases, Balance Transfers & Other Charges \$1,000.00
 + Fees Charged \$0.00
 + Interest Charged \$0.00
 = New Balance \$55.92

24-Hour Customer Service: 1-800-642-4720
 TTY for Hearing/Speech Impaired: 1-800-419-2265
 Outside the US Call Collect: 1-925-825-7600
 Wells Fargo Online®: wells.fargo.com

Send General Inquiries To:
 PO Box 10347, Des Moines IA, 50306-0347

Total Credit Limit \$5,000 Total Available Credit \$0

Payment Information

New Balance \$55.92
 Minimum Payment \$10.00
 Payment Due Date 08/16/2017

Send Payments To:
 PO Box 51193, Los Angeles CA, 90051-5493

Late Payment Warning: If we do not receive your Minimum Payment by 08/16/2017, you may have to pay a late fee up to \$0.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay ...	You will pay off the New Balance shown on this statement in about ...	And you will end up paying an estimated total of ...
Only the minimum payment	6 month(s)	\$56

If you would like information about credit counseling services, refer to www.usdoj.gov/ust/eo/bapcpa/ccde/cc_approved.htm or call 1-877-286-2108.

Transactions

Trans	Post	Reference Number	Description	Credits	Charges
& TRANSACTION WAS TRANSFERRED FROM LOST / STOLEN ACCOUNT					

Payments

07/10	07/10	& F55830061000IXFRL	PAYMENT - THANK YOU	1,000.00	
TOTAL PAYMENTS FOR THIS PERIOD				\$1,000.00	

Purchases, Balance Transfers & Other Charges

07/13	07/13	F55830062000TF194	PAYMENT ON 07/10/17 POSTED IN ERROR		1,000.00
TOTAL PURCHASES, BALANCE TRANSFERS & OTHER CHARGES FOR THIS PERIOD					\$1,000.00

Fees Charged

TOTAL FEES CHARGED FOR THIS PERIOD	\$0.00
------------------------------------	--------

Interest Charged

INTEREST CHARGE ON PURCHASES	0.00
INTEREST CHARGE ON CASH ADVANCES	0.00
TOTAL INTEREST CHARGED FOR THIS PERIOD	\$0.00

2017 Totals Year-to-Date

TOTAL FEES CHARGED IN 2017	\$0.00
TOTAL INTEREST CHARGED IN 2017	\$0.00

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Continued

5596 YKG 1 3 14 170721 0 2 PAGE 1 of 2 10 5583 2000 CHGZ 01DP5596

Detach and mail with check payable to Wells Fargo

Account Number 4465 4204 9985 3984
 New Balance \$55.92
 Minimum Payment \$10.00
 Payment Due Date 08/16/2017

00005592001000000000100044654204998539849

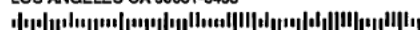
Amount
Enclosed

ALECIA A KREMIDAS



WELLS FARGO CARD SERVICES

PO Box 51193
 LOS ANGELES CA 90051-5493



Check here and see reverse for address and/or phone number correction.

ER 000535

IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Billing Rights Summary. If you believe your bill is wrong (an "Error"), or if you need more information about a transaction on your bill, write to us on a separate sheet of paper as soon as possible at: P.O. Box 522, Des Moines, IA 50306-0522. We must hear from you no later than 60 days after we sent you the first bill on which the Error appeared. You may notify us using other means (including calling us at the number listed on the front of the statement), but doing so will not preserve your rights.

In your letter (a "Written Notice"), provide the following information:

- Your name and account number.
- The date and dollar amount of suspected Error.
- Description of the Error and why you believe there is an Error. If you need more information, please describe the item you are not sure about.

You do not have to pay any alleged Error amount while we are investigating, but you are still obligated to pay the parts of your bill that are not part of the alleged Error amount. While we investigate, we cannot report you as delinquent or take any action to collect the alleged Error amount. If you have authorized us to pay your credit card bill automatically from your savings or checking account, you can stop the payment on any amount you believe is an Error. To stop the payment, your Written Notice must reach us three (3) business days before the automatic payment is scheduled to occur.

Special Rule for Credit Card Purchases: If you have a problem with the quality of goods or services you purchased with a credit card, and you have tried in good faith to correct the problem with the merchant, you may not have to pay the remaining amount due on the goods or services. You have this protection only when the purchase price was more than \$50 and the purchase was made in your home state or within 100 miles of your mailing address and you have not paid the balance of the disputed charge. If we own or operate the merchant, or if we mailed you the advertisement for the property or services, all purchases are covered regardless of amount or location of purchase.

Credit Information. NOTICE: We may furnish information about your account to consumer reporting agencies. You have the right to dispute the accuracy of information that we have reported by writing to us at P.O. Box 14517, Des Moines, IA 50306-3517 and describing the specific information that is inaccurate or in dispute and the basis for any dispute with supporting documentation. In the case of information that you believe relates to an identity theft, you will need to provide us with an identity theft report.

Payments. "Conforming Payments" are payments mailed using the enclosed envelope and payment coupon to the payment address specified on the statement or, generally, made via the "Transfers" tab or "Make a Payment" link on the credit card Account Activity tab of Wells Fargo Online Banking at www.wellsfargo.com. Conforming Payments received via mail by 5:00 p.m. will be credited as of the date of receipt. Conforming Payments received after 5:00 p.m. will be credited as of the next day. Cut-off times for Conforming Payments made via our Web site will be disclosed at the time of the transaction. "Non-Conforming Payments" are payments made by any other means and may not receive credit for up to five days after the date of receipt. Non-Conforming payments include, but are not limited to, placing the provided envelope and payment coupon in another envelope.

Notice About Electronic Check Conversion: When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

Payment in Full for Less Than Account Balance Request: If you intend to pay your account in full with an amount less than the total owed on your account, you must send your request to us at: P.O. Box 10311, Des Moines, IA 50306-0311. Such payments will not discharge your full debt.

How We Calculate Your Balance. We use a method called "average daily balance (including new purchases)". For more information regarding this calculation, please call our toll-free Customer Service number located on the front of this statement.

How to Avoid Paying Interest on Purchases. Your Payment Due Date is at least 25 days after the close of each billing period. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the transaction date.

Secured Accounts. For Secured accounts, your credit card account is secured by a pledge of your Secured Card Collateral Account with Wells Fargo Bank, N.A., established in connection with your application for the card. You agree that this pledge includes and gives the right to Bank to redeem, collect and withdraw any part or the full amount of the Secured Card Collateral Account upon any default under your Secured credit card agreement, or in the event your Secured credit card agreement is terminated by Bank for any reason. This pledge is given as a security interest for any and all amounts you owe, including interest, fees and costs which may accrue under your Secured credit card account. You agree that if your Secured credit card account is closed for any reason, the bank may apply funds in the Secured Card Collateral Account to pay off any balance on the credit card account. If there are still funds remaining in the Collateral Account after doing so, these funds may remain on deposit for up to 60 days before being remitted to you.

Customer Service Monitoring. Calls may be recorded or monitored.

INFORMACIÓN IMPORTANTE SOBRE SU CUENTA

Resumen de Derechos de Facturación. Si cree que hay algún error en su estado de cuenta (un "Error"), o si necesita más información sobre una transacción que aparece en su estado de cuenta, por favor escríbanos en una hoja separada tan pronto como le sea posible, a la siguiente dirección: P.O. Box 522, Des Moines, IA 50306-0522. Debe comunicarse con nosotros dentro de un lapso de 60 días de la fecha en que le hayamos enviado el primer estado de cuenta en que apareció el Error. Puede comunicarse con nosotros por otros medios (lo que incluye llamarnos al número que aparece en el frente del estado de cuenta) pero al hacerlo no preservará sus derechos.

En su carta (una "Notificación por Escrito"), por favor incluya la siguiente información:

- Su nombre y número de cuenta.
- La fecha y el monto en dólares del Error del que sospecha.
- Una descripción del Error y la razón por la cual usted cree que es un Error. Si necesita más información, por favor describa el ítem del que no está seguro.

No tiene que pagar el monto del supuesto Error mientras lo investiguemos, pero seguirá obligado a pagar las porciones del saldo de su cuenta que no formen parte del monto del supuesto Error. Mientras investiguemos, no podremos reportarlo en calidad de deudor moroso, ni tomar medidas para cobrar el monto del supuesto Error. Si nos ha autorizado a pagar su cuenta de tarjeta de crédito de manera automática desde su cuenta de cheques o de ahorros, puede suspender el pago por cualquier monto que crea que es un Error. Para suspender el pago, su Notificación por Escrito debe llegarnos tres (3) días hábiles antes del día en que está programado el pago automático.

Regla Especial para Compras con Tarjeta de Crédito: Si usted tiene algún problema con la calidad de los bienes o servicios que adquirió con una tarjeta de crédito, y ha intentado de buena fe resolver el problema con el comerciante, quizá no tenga que pagar el monto restante adeudado por los bienes o servicios. Usted cuenta con esta protección solamente si el precio de compra superó o los \$50 y la compra fue realizada en el estado en que residió o a una distancia no superior a 100 millas de su dirección postal, y siempre que no haya pagado el saldo del cargo en disputa. Si somos los propietarios u operadores de dicho comercio, o si le enviamos por correo un anuncio publicitario de los bienes o servicios, todas las compras están cubiertas, sin importar el monto o lugar de la compra.

Información de Crédito. AVISO: Podremos dar información sobre su cuenta a las agencias de informes sobre consumidores. Usted tiene el derecho a cuestionar la exactitud de la información reportada por nosotros al escribir la siguiente dirección: P.O. Box 14517, Des Moines, IA 50306-3517. En su carta, deberá describir la información específica que sea inexacta o en disputa, y fundamentar cualquier disputa con documentación de respaldo. Si considera que se trata de información relacionada con el robo de identidad, deberá enviarnos una denuncia de robo de identidad correspondiente.

Pagos. Los "Pagos en Conformidad" son pagos enviados con el sobre adjunto y talón de pago a la dirección de pago especificada en el estado de cuenta o en general a través de la ficha "Transfers" (sólo disponible en inglés) o "Make a Payment" en la ficha "Account Activity" (sólo disponible en inglés) de Wells Fargo en www.wellsfargo.com. Los Pagos en Conformidad recibidos por correo a más tardar a las 5 p.m. serán acreditados a la fecha de su recibo. Los Pagos en Conformidad recibidos después de las 5 p.m. serán acreditados al día siguiente. Las horas de límite para Pagos en Conformidad realizados a través de nuestro sitio Web serán revelados al momento de la transacción. Los "Pagos en Incumplimiento" son pagos efectuados por cualquier otro medio y es posible que no reciban crédito durante hasta 5 días después de la fecha de recibo. Los Pagos en Incumplimiento incluyen, sin limitación, poner el sobre proporcionado y talón de pago en otro sobre.

Aviso Sobre Conversión de Cheques Electrónicos: Al proporcionar un cheque como forma de pago, usted nos da su autorización para utilizar la información de su cheque a fin de realizar una sola transferencia electrónica de su cuenta o procesar el pago como una transacción de cheque. Cuando nosotros usamos la información de su cheque para realizar una transferencia electrónica de fondos, los mismos podrán ser retirados de su cuenta tan rápido como el mismo día en que recibamos su pago, y su institución financiera no le regresará su cheque.

Pago Total por un Monto Inferior al Saldo de la Cuenta: Si usted piensa liquidar la totalidad del saldo de su cuenta por un monto inferior al monto total adeudado en su cuenta, deberá enviarnos su solicitud a la siguiente dirección: P.O. Box 10311, Des Moines, IA 50306-0311. Dichos pagos no cancelarán la totalidad de su deuda.

Cómo Calculamos Su Saldo. Usamos un método denominado "saldo diario promedio (incluyendo nuevas compras)". Para más información acerca de este cálculo, por favor llame a nuestro número gratuito de Servicio al Cliente indicado al frente de este estado de cuenta.

Cómo Evitar Pagar Intereses sobre Compras. La Fecha de Vencimiento del Pago es al menos 25 días después del cierre de cada periodo de facturación. No cargaremos intereses sobre las compras si usted paga la totalidad de su saldo a más tardar en la fecha de vencimiento de cada mes. Comenzaremos a cargar intereses sobre adelantos en efectivo y transferencias de saldo a la fecha de transacción.

Cuentas Garantizadas. Para Cuentas Garantizadas, su cuenta de tarjeta de crédito está garantizada por la entrega en prenda de su Cuenta Colateral de la Tarjeta Garantizada de Wells Fargo Bank N.A., establecida en relación con su solicitud de la tarjeta. Usted conviene en que esta entrega en prenda incluye y da al Banco el derecho a redimir, cobrar y retirar cualquier parte o la totalidad del monto depositado en la Cuenta Colateral de la Tarjeta Garantizada en caso de cualquier acto de incumplimiento bajo su convenio de la tarjeta de crédito garantizada, o en caso de que dicho convenio sea terminado por el Banco, por cualquier motivo. Esta prenda se entrega como garantía de cada uno y todos los montos que usted adeude, incluidos los intereses, cuotas y costos que pueden acumularse bajo su Cuenta de Tarjeta de Crédito Garantizada. Usted está de acuerdo en que si su Cuenta de Tarjeta de Crédito Garantizada se cierra por cualquier razón, el banco podrá aplicar los fondos mantenidos en la Cuenta Colateral de la Tarjeta Garantizada para liquidar cualquier saldo en la cuenta de tarjeta de crédito. Si después de hacerlo aún quedan fondos en la Cuenta Colateral, dichos fondos podrán permanecer en depósito durante hasta 60 días antes de que sean remitidos a usted.

Monitoreo del Servicio al Cliente. Las llamadas pueden ser grabadas o monitoreadas.

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Change of Address Form – If your address has changed, provide your complete new address below. Be sure to check box on reverse side of coupon and enclose in the envelope provided. Please use this section only for address changes. If you have any questions, please call the toll-free customer service number on the front of this statement.

Formulario de Cambio de Dirección – Si su dirección ha cambiado, proporcione su nueva dirección completa abajo. Asegúrese de indicar el cuadro al dorso del cupón y adjúntelo en el sobre anexo. Por favor use esta sección solamente para cambios de dirección. Si tiene preguntas, por favor llame al número de Servicio al Cliente al frente de este estado de cuenta.

ACCOUNT FIRST NAME	ACCOUNT LAST NAME
NEW STREET ADDRESS	
PO BOX/ APT #	
CITY, STATE/ZIP	
HOME PHONE	WORK PHONE

RESP'T APP 2228

ER 000536

WELLS FARGO



Account Number
Statement Billing Period
Page 2 of 2

3984
06/22/2017 to 07/21/2017



Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Days in Billing Cycle	Interest Charge
PURCHASES	0.00%	\$0.00	30	\$0.00
CASH ADVANCES	0.00%	\$0.00	30	\$0.00

RESP'T APP 2229

ER 000537

EXHIBIT 58

EXHIBIT 58

EXHIBIT 58
RESP'T APP 2230



PO BOX 489
NEWARK, NJ 07101-0489

Billing period
Account number
Invoice number

Nov 13, 2018 - Dec 12, 2018
[REDACTED]00001
9152745631

KEYLINE



ALECIA A KREMIDAS



See last page for payment information and how
to split your bill.

Questions? Visit vzw.com/contactus

Hi Alecia, here's your bill for this month.



Alecia Draper [REDACTED]1646 page 2 \$15.00

Moonwood Coffee Company [REDACTED]6102 page 3 \$45.00

Emily Reed [REDACTED]7489 page 3 \$45.00

Adam Reed [REDACTED]3216 page 4 \$67.91

Anthony Reed [REDACTED]0135 page 4 \$99.66



Surcharges \$7.40

Taxes and government fees \$4.68

\$284.65

Due January 4

Autopay January 1

RESP'T APP 2231

ER 000861



PO BOX 489
NEWARK, NJ 07101-0489

Billing period
Account number
Invoice number

Dec 13, 2018 - Jan 12, 2019
[REDACTED] 00001
9161007595

KEYLINE



ALECIA A KREMIDAS



See last page for payment information and how
to split your bill.

Questions? Visit vzw.com/contactus

Hi Alecia, here's your bill for this month.



Alecia Draper [REDACTED] 646 page 2 \$15.00

Moonwood Coffee Company [REDACTED] 6102 page 3 \$45.00

Emily Reed [REDACTED] 7489 page 3 \$45.00

Adam Reed [REDACTED] 8216 page 4 \$67.91

Anthony Reed [REDACTED] 0135 page 4 \$99.66



Surcharges \$7.48

Taxes and government fees \$4.68

\$284.73

Due February 4

Autopay February 1

RESP'T APP 2232

ER 000862



PO BOX 489
NEWARK, NJ 07101-0489

Billing period
Account number
Invoice number

Jan 13, 2019 - Feb 12, 2019

9169240063

KEYLINE

|||||

ALECIA A KREMIDAS

See last page for payment information and how
to split your bill.

Questions? Visit vzw.com/contactus

Hi Alecia, here's your bill for this month.



Alecia Draper	646	page 2	\$15.00
Moonwood Coffee Company	6102	page 2	\$45.00
Emily Reed	7489	page 3	\$45.00
Adam Reed	8216	page 3	\$67.91
Anthony Reed	0135	page 4	\$99.66
Surcharges			\$7.48
Taxes and government fees			\$4.68



\$284.73

Due March 4

Autopay March 1

RESP'T APP 2233

ER 000863



PO BOX 489
NEWARK, NJ 07101-0489

Billing period
Account number
Invoice number

Feb 13, 2019 - Mar 12, 2019
[REDACTED]
9177477367



ALECIA A KREMIDAS
[REDACTED]

000379534
P103

See last page for payment information and how
to split your bill.

Questions? Visit vzw.com/contactus

Hi Alecia, here's your bill for this month.



Alecia Draper [REDACTED] 1646	page 2	\$15.00
Moonwood Coffee Company [REDACTED] 6102	page 2	\$45.00
Emily Reed [REDACTED] 7489	page 3	\$45.00
Adam Reed [REDACTED] 8216	page 3	\$67.91
Anthony Reed [REDACTED] 0135	page 4	\$99.66



Surcharges	\$7.44
Taxes and government fees	\$4.80

\$284.81

Due April 4
Autopay April 1

RESP'T APP 2234

ER 000864



PO BOX 489
NEWARK, NJ 07101-0489

Billing period
Account number
Invoice number

Mar 13, 2019 - Apr 12, 2019
[REDACTED] 00001
9185730813



ALECIA A KREMIDAS

000149819

P104

See last page for payment information and how
to split your bill.

Questions? Visit vzw.com/contactus

Hi Alecia, here's your bill for this month.



Alecia Draper [REDACTED] 646	page 2	\$15.00
Moonwood Coffee Company [REDACTED] 6102	page 2	\$45.00
Emily Reed [REDACTED] 7489	page 3	\$45.00
Adam Reed [REDACTED] 8216	page 3	\$67.91
Anthony Reed [REDACTED] 0135	page 4	\$99.66



Surcharges	\$7.32
Taxes and government fees	\$4.80

\$284.69

Due May 4
Autopay May 1

RESP'T APP 2235

ER 000865



PO BOX 489
NEWARK, NJ 07101-0489

Billing period
Account number
Invoice number

Apr 13, 2019 - May 12, 2019
00001
9193959612

KEYLINE



ALECIA A KREMIDAS

See last page for payment information and how
to split your bill.

Questions? Visit vzw.com/contactus

Hi Alecia, here's your bill for this month.



Alecia Draper	646	page 2	\$15.00
Moonwood Coffee Company	6102	page 3	\$45.00
Emily Reed	7489	page 3	\$45.00
Adam Reed	8216	page 4	\$67.91
Anthony Reed	0135	page 4	\$99.66



Surcharges	\$7.32
Taxes and government fees	\$4.80

\$284.69

Due June 4
Autopay June 1

RESP'T APP 2236

ER 000866



LEGRAND MARKETING
ATTN: JANET DRAPER

Page: 19 of 23
Bill Cycle Date: 12/03/18 - 01/02/19
Account: [REDACTED]
Foundation Account: [REDACTED] 6654
Invoice: 828363319X01102019

Visit us online at: www.att.com/business

[REDACTED] -1524
ALECIA DRAPER

att.com/global

Monthly Charges - Jan 3 thru Feb 2

1. Access for iPhone 4G LTE w/ Visual Voicemail	15.00
2. Mexico Roaming Bonus	0.00
3. MX Unl Calls to US/MX, ILD to ROW	0.00
Total Monthly Charges	15.00

Other Charges and Credits

Voice Usage Summary

Shared Minutes	Unlimited
Minutes	
Minutes Used	2,029

Data Usage Summary

Shared Messaging	Unlimited
Used	302

Promo for Mobile Share Value 40GB with Rollover Data
Individual GB Used 0.99

1 Gigabyte (GB) = 1024MB, 1 Megabyte (MB) = 1024KB

Surcharges and Other Fees

4. Administrative Fee	1.99
5. Federal Universal Service Charge	1.28
6. Property Tax Allotment	0.31
7. Regulatory Cost Recovery Charge	1.25
8. State Public Utility Surcharge	0.03
Total Surcharges and Other Fees	4.86

Government Fees and Taxes

9. CA Advanced Services Fund (CASF)	0.07
10. CHCF A	0.03
11. City Utility Users Tax	1.02
12. Relay Service Device Fund	0.06
13. State 911 Tax	0.22
14. Teleconnect Fund	0.09
15. Universal Lifeline	0.57
Total Government Fees and Taxes	2.06

Total Other Charges & Credits 6.92

Total for [REDACTED] 1524 21.92

[REDACTED] -0099
VALERIE DUARTE

Mexico Roaming Bonus - Includes 1 gigabyte of data in Mexico; data overage is \$20 each additional 1GB. Unlimited text sent from Mexico and unlimited talk from Mexico to the U.S. and Mexico. Talk from Mexico to other international destinations will be billed at standard international long distance rates. Pay-per-use rates apply for all services in all other international countries. For more details, visit att.com/global.

Monthly Charges - Jan 3 thru Feb 2

1. Access for iPhone 4G LTE w/ Visual Voicemail	15.00
2. Mexico Roaming Bonus	0.00
3. MX Unl Calls to US/MX, ILD to ROW	0.00
Total Monthly Charges	15.00

Other Charges and Credits

Voice Usage Summary

Shared Minutes	Unlimited
Minutes	
Minutes Used	127

Data Usage Summary

Shared Messaging	Unlimited
Used	217

Promo for Mobile Share Value 40GB with Rollover Data
Individual GB Used 0.06

1 Gigabyte (GB) = 1024MB, 1 Megabyte (MB) = 1024KB

Wireless Equipment Charges

Installment Plan ID: 280000023588645 - Est. on 11/08/17

IPHONE 6S PLUS 32GB ROSE GOLD

Amount Financed: \$549.99

Date	Description	
4. 12/08	Installment 14 of 24	22.92

Balance Remaining after Current Installment: \$229.11

* To pay off your installment plan early, please visit att.com/payoffNEXT for details.

Surcharges and Other Fees

5. Administrative Fee	1.99
6. Federal Universal Service Charge	1.28
7. Property Tax Allotment	0.31
8. Regulatory Cost Recovery Charge	1.25

RESP'T APP 2237

ER 000867



LEGRAND MARKETING
ATTN: JANET DRAPER

Page: 19 of 23
Bill Cycle Date: 01/03/19 - 02/02/19
Account: [REDACTED]
Foundation Account: [REDACTED]
Invoice: 828363319X02102019

Visit us online at: www.att.com/business

1524
JANET DRAPER

Mexico Roaming Bonus - Includes 1 gigabyte of data in Mexico; data overage is \$20 each additional 1GB. Unlimited text sent from Mexico and unlimited talk from Mexico to the U.S. and Mexico. Talk from Mexico to other international destinations will be billed at standard international long distance rates. Pay-per-use rates apply for all services in all other international countries. For more details, visit att.com/global.

Monthly Charges - Feb 3 thru Mar 2

1. Access for iPhone 4G LTE w/ Visual Voicemail	15.00
2. Mexico Roaming Bonus	0.00
3. MX Int Calls to US/MX, ILD to ROW	0.00
Total Monthly Charges	15.00

Other Charges and Credits

Voice Usage Summary

Shared Minutes	Unlimited
Minutes	
Minutes Used	3,193

Data Usage Summary

Shared Messaging	Unlimited
Used	505

Promo for Mobile Share Value 40GB with Rollover Data
Individual GB Used 0.13

1 Gigabyte (GB) = 1024MB, 1 Megabyte (MB) = 1024KB

Mobile Share Value 40GB promo w/Rollover Data
Individual GB Used 0.94

1 Gigabyte (GB) = 1024MB, 1 Megabyte (MB) = 1024KB

Surcharges and Other Fees

4. Administrative Fee	1.99
5. Federal Universal Service Charge	1.28
6. Property Tax Allotment	0.31
7. Regulatory Cost Recovery Charge	1.25
8. State Public Utility Surcharge	0.03
Total Surcharges and Other Fees	4.86

Government Fees and Taxes

9. CA Advanced Services Fund (CASF)	0.07
10. CHCF A	0.03
11. City Utility Users Tax	1.02
12. Relay Service Device Fund	0.06
13. State 911 Tax	0.09

Other Charges and Credits - Continued

14. Teleconnect Fund	0.09
15. Universal Lifeline	0.57
Total Government Fees and Taxes	1.93

Total Other Charges & Credits 6.79

Total for 1524 21.79

0099
VALERIE DUARTE

Mexico Roaming Bonus - Includes 1 gigabyte of data in Mexico; data overage is \$20 each additional 1GB. Unlimited text sent from Mexico and unlimited talk from Mexico to the U.S. and Mexico. Talk from Mexico to other international destinations will be billed at standard international long distance rates. Pay-per-use rates apply for all services in all other international countries. For more details, visit att.com/global.

Monthly Charges - Feb 3 thru Mar 2

1. Access for iPhone 4G LTE w/ Visual Voicemail	15.00
2. Mexico Roaming Bonus	0.00
3. MX Int Calls to US/MX, ILD to ROW	0.00
Total Monthly Charges	15.00

Other Charges and Credits

Voice Usage Summary

Shared Minutes	Unlimited
Minutes	
Minutes Used	146

Data Usage Summary

Shared Messaging	Unlimited
Used	289

Promo for Mobile Share Value 40GB with Rollover Data
Individual GB Used 0.03

1 Gigabyte (GB) = 1024MB, 1 Megabyte (MB) = 1024KB

Mobile Share Value 40GB promo w/Rollover Data
Individual GB Used 0.30

1 Gigabyte (GB) = 1024MB, 1 Megabyte (MB) = 1024KB

Wireless Equipment Charges

Installment Plan ID: 280000023588645 - Est. on 11/08/17
IPHONE 6S PLUS 32GB ROSE GOLD

RESP'T APP 2238

ER 000868



LEGRAND MARKETING
ATTN: JANET DRAPER

Page: 20 of 24
Bill Cycle Date: 02/03/19
Account: [REDACTED]
Foundation Account: [REDACTED]
Invoice: 828363319X03102

Visit us online at: www.att.com/business



[REDACTED] 5437
MARIA

Other Charges and Credits - Continued

Data Usage Summary

Shared Messaging Unlimited
Used 5

Mobile Share Value 40GB promo w/Rollover Data
Individual GB Used 0.36
1 Gigabyte (GB) = 1024MB, 1 Megabyte (MB) = 1024KB

Wireless Equipment Charges

Installment Plan ID: 280000013878942 - Est. on 01/31/17
IPHONE 6S PLUS 32GB SPACE GRAY
Amount Financed: \$649.99

Date	Description	
5. 03/01	Installment 26 of 30	21.67

Balance Remaining after Current Installment: \$86.57

* To pay off your installment plan early, please visit
att.com/payoffNEXT for details.

Surcharges and Other Fees

6. Administrative Fee	1.99
7. Federal Universal Service Charge	1.28
8. Property Tax Allotment	0.31
9. Regulatory Cost Recovery Charge	1.25
10. State Public Utility Surcharge	0.03
Total Surcharges and Other Fees	4.86

Government Fees and Taxes

11. CA Advanced Services Fund (CASF)	0.07
12. CHCF A	0.03
13. Relay Service Device Fund	0.06
14. State 911 Tax	0.09
15. Teleconnect Fund	0.09
16. Universal Lifeline	0.57
Total Government Fees and Taxes	0.91

Total Other Charges & Credits 27.44

Total for [REDACTED] 5437 62.39



[REDACTED] 1524
ALECIA DRAPER

Mexico Roaming Bonus - Includes 1 gigabyte of data in

Mexico; data coverage is \$20 each additional 1GB. Unlimited text sent from Mexico and unlimited talk from Mexico to the U.S. and Mexico. Talk from Mexico to other international destinations will be billed at standard international long distance rates. Pay-per-use rates apply for all services in all other international countries. For more details, visit att.com/global.

Monthly Charges - Mar 3 thru Apr 2

1. Access for iPhone 4G LTE w/ Visual Voicemail	15.00
2. Mexico Roaming Bonus	0.00
3. MX Int'l Calls to US/MX, ILD to ROW	0.00
Total Monthly Charges	15.00

Other Charges and Credits

Voice Usage Summary

Shared Minutes	Unlimited
Minutes	
Minutes Used	2,953

Data Usage Summary

Shared Messaging	Unlimited
Used	758

Mobile Share Value 40GB promo w/Rollover Data
Individual GB Used 1.97
1 Gigabyte (GB) = 1024MB, 1 Megabyte (MB) = 1024KB

Surcharges and Other Fees

4. Administrative Fee	1.99
5. Federal Universal Service Charge	1.28
6. Property Tax Allotment	0.31
7. Regulatory Cost Recovery Charge	1.25
8. State Public Utility Surcharge	0.03
Total Surcharges and Other Fees	4.86

Government Fees and Taxes

9. CA Advanced Services Fund (CASF)	0.07
10. CHCF A	0.03
11. City Utility Users Tax	1.02
12. Relay Service Device Fund	0.06
13. State 911 Tax	0.09
14. Teleconnect Fund	0.09
15. Universal Lifeline	0.57
Total Government Fees and Taxes	1.93

Total Other Charges & Credits 6.79

Total for [REDACTED] 1524 21.79

RESP'T APP 2239

4361.004.030125.10.12.0000000 NNNNNNNN 001765.086177

ER 000869





Page: 16 of 24
Issue Date: Apr 02, 2019
Account Number: [REDACTED]
Foundation Account: [REDACTED]
Invoice: 828363319X04102019

[REDACTED] 5437 continued

Surcharges & fees

6. Administrative Fee	\$1.99
7. Federal Universal Service Charge	\$1.20
8. Property Tax Allotment	\$0.31
9. Regulatory Cost Recovery Charge	\$1.25
10. State Public Utility Surcharge	\$0.03

Data	Used
Mobile Share Value 40GB promo w/Rollover Data (40.00 GB)	0.57

IPHONE 6S PLUS 32GB 280000013878942 SPACE GRAY

Established on	Jan 31, 2017
Amount financed	\$649.99
Installment 27 of 30 (Mar 31, 2019)	\$21.67
Balance remaining after current installment	\$64.90

To pay off your installment plan early, please
wireless.att.com/business for details

Government taxes & fees

11. CA Advanced Services Fund (CASF)	\$0.07
12. CHCFA	\$0.03
13. Relay Service Device Fund	\$0.06
14. State 911 Tax	\$0.09
15. Teleconnect Fund	\$0.09
16. Universal Lifeline	\$0.58

Total for [REDACTED] 5437 \$62.32

Phone, [REDACTED] 1524
ALECIA DRAPER

Monthly charges

Apr 03 - May 02

1. Access for iPhone 4G LTE w/ Visual Voicemail	\$15.00
2. Mexico Roaming Bonus	\$0.00
3. MX Int'l Calls to US/MX, ILD to ROW	\$0.00

Usage summary

Talk	Used
Shared Minutes (unlimited)	2,345

Text	Used
Shared Messaging (unlimited)	596

Data	Used
Mobile Share Value 40GB promo w/Rollover Data (40.00 GB)	1.84

Surcharges & fees

4. Administrative Fee	\$1.99
5. Federal Universal Service Charge	\$1.20
6. Property Tax Allotment	\$0.31
7. Regulatory Cost Recovery Charge	\$1.25
8. State Public Utility Surcharge	\$0.03

Government taxes & fees

9. CA Advanced Services Fund (CASF)	\$0.07
10. CHCFA	\$0.03
11. City Utility Users Tax	\$1.02
12. Relay Service Device Fund	\$0.06
13. State 911 Tax	\$0.09
14. Teleconnect Fund	\$0.09
15. Universal Lifeline	\$0.58

Total for [REDACTED] 524 \$21.72

RESP'T APP 2240

Wireless continues...

14 003387 9425 003 09 00000000 NNNN [REDACTED] 000870





Page: 16 of 24
Issue Date: May 02, 2019
Account Number: [REDACTED]
Foundation Account: [REDACTED]
Invoice: 828363319X05102019

[REDACTED] 5437 continued

Surcharges & fees

6. Administrative Fee	\$1.99
7. Federal Universal Service Charge	\$1.20
8. Property Tax Allotment	\$0.31
9. Regulatory Cost Recovery Charge	\$1.25
10. State Public Utility Surcharge	\$0.03

Government taxes & fees

11. CA Advanced Services Fund (CASF)	\$0.07
12. CHCF A	\$0.03
13. Relay Service Device Fund	\$0.06
14. State 911 Tax	\$0.09
15. Teleconnect Fund	\$0.09
16. Universal Lifeline	\$0.58

Total for [REDACTED] 5437 \$62.32

Data	Used
Mobile Share Value 40GB promo w/Rollover Data (40.00 GB)	0.42

IPHONE 6S PLUS 32GB 280000013878942 SPACE GRAY

Established on	Jan 31, 2017
Amount financed	\$649.99
Installment 28 of 30 (May 01, 2019)	\$21.67
Balance remaining after current installment	\$43.23
To pay off your installment plan early, please wireless.att.com/business for details	

Phone, [REDACTED] 524
ALECIA DRAPER

Monthly charges

May 03 - Jun 02

1. Access for iPhone 4G LTE w/ Visual Voicemail	\$15.00
2. Mexico Roaming Bonus	\$0.00
3. MX Int'l Calls to US/MX, ILD to ROW	\$0.00

Surcharges & fees

4. Administrative Fee	\$1.99
5. Federal Universal Service Charge	\$1.20
6. Property Tax Allotment	\$0.31
7. Regulatory Cost Recovery Charge	\$1.25
8. State Public Utility Surcharge	\$0.03

Government taxes & fees

9. CA Advanced Services Fund (CASF)	\$0.07
10. CHCF A	\$0.03
11. City Utility Users Tax	\$1.02
12. Relay Service Device Fund	\$0.06
13. State 911 Tax	\$0.09
14. Teleconnect Fund	\$0.09
15. Universal Lifeline	\$0.58

Total for [REDACTED] 524 \$21.72

Usage summary

Talk	Used
Shared Minutes (unlimited)	2,721
Text	Used
Shared Messaging (unlimited)	627
Data	Used
Mobile Share Value 40GB promo w/Rollover Data (40.00 GB)	2.63

Wireless continues...

RESP'T APP 2241

ER 000871



Page: 15 of 23
Issue Date: Jun 02, 2019
Account Number: [REDACTED]
Foundation Account: [REDACTED]
Invoice: 828363319X06102019

...714.876.5437 continued

13. Relay Service Device Fund	\$0.06
14. State 911 Tax	\$0.09
15. Teleconnect Fund	\$0.09
16. Universal Lifeline	\$0.58
Total for [REDACTED] 5437	\$62.32

IPHONE 6S PLUS 32GB 280000013878942
SPACE GRAY

Established on	Jan 31, 2017
Amount financed	\$649.99
Installment 29 of 30 (May 31, 2019)	\$21.67
Balance remaining after current installment	\$21.56

To pay off your installment plan early, please
wireless.att.com/business for details

Phone, [REDACTED] 1524
ALECIA DRAPER

Monthly charges	Jun 03 - Jul 02
1. Access for iPhone 4G LTE w/ Visual Voicemail	\$15.00
2. Mexico Roaming Bonus	\$0.00
3. MX Int'l Calls to US/MX, ILD to ROW	\$0.00

Surcharges & fees	
4. Administrative Fee	\$1.99
5. Federal Universal Service Charge	\$1.20
6. Property Tax Allotment	\$0.31
7. Regulatory Cost Recovery Charge	\$1.25
8. State Public Utility Surcharge	\$0.03

Government taxes & fees	
9. CA Advanced Services Fund (CASF)	\$0.07
10. CHCF A	\$0.03
11. City Utility Users Tax	\$1.02
12. Relay Service Device Fund	\$0.06
13. State 911 Tax	\$0.09
14. Teleconnect Fund	\$0.09
15. Universal Lifeline	\$0.58

Total for [REDACTED] 1524	\$21.72
----------------------------------	----------------

Usage summary

Talk	<i>Used</i>
Shared Minutes (unlimited)	2,662
Text	<i>Used</i>
Shared Messaging (unlimited)	849
Data	<i>Used</i>
Mobile Share Value 40GB promo w/Rollover Data (40.00 GB)	1.42

RESP'T APP 2242

Wireless continues...

ER 000872

EXHIBIT 59

EXHIBIT 59

EXHIBIT 59
RESP'T APP 2243

4682

Owner Info: *Africa*

Reed

Last

Emily

First

Primary Phone

Secondary Phone

Address

City

Zip

Veterinarian:

In an event of an emergency, I authorize this establishment to provide necessary treatment for my pet at my expense.

☒ Emily Reed

☐ Bows

☐ Bandanna

☐ Collar

For Lisa

Pet Info (1):

Monarch

Name

Age

Golden Doodle

Breed

Color

Male

☒ Female

Spayed/Neutered

Medical/Health Issues

Pet Info (2):

Name

Age

Bubbles Dog Grooming and Spa



♥♥ Cats welcome! ♥♥

(714) 963-7441

19171 Magnolia St #18
Huntington Beach, CA 92646

RESPECT APR 22 2017 11:47 days!

ER 001018

Bow in hair
one side

Pet Name: Monarch.

Media/Behavior Notes:

☐ Bows ☐ Bandanna ☐ Cologne ☐ NO Cologne

Date	Service/Clip Notes	Price	Groom
6/17/14	#2 Alo # C head	70-S	Tu
7-28-16	# " A Hd + teeth	80	Jessica
8-25-16	" " " + teeth	80	Britt
9-15-16	Same O Head	80	Jessica
10-27-16	2 Alo A Head + teeth	80	Jessica
11-22-16	FC Nail + teeth	25	Jessica
12-15-16	B/N Semi FC Ff + teeth #2 SC	60	Jessica
4/24/17	FC #5 body, #1 head + teeth #5 FC	80	UTA
5-18-17	FC, Tail, + Ears - only -	10	Jess -
6-1-17	2 Alo O Hd 5 face trim ears	80	Jessica
7/17/17	#5 body, #1 head + teeth	80	UTA
9-15-17	FC + Tail trim -		

RESPT APP 2245 Jess

Bow in
one side

NO Cologne
Price

Groomer

Behavior Notes:

☐ Bows ☐ Bandanna ☐ Cologne ☐ NO Cologne

Date	Service/Clip Notes	Price	Groomer
10-21-17	7 A10 7 HAD Trim A10 teck	80	Jessie
12-15-17	Same	80	Jessie
7-2-18	Same 7 A10 H/d fcl trim ears	80	Jessie
10-2-18	Same	80	Jessie
11-21-18	Same	82	Jessie
2/21/19	Same #7 a/b, w/ face trim ears	82	Uma
4/24/19	Same	82	Uma

RESP'T APP 2246

Receipt from Bubbles Dog Grooming and Spa

1 message

Bubbles Dog Grooming and Spa via Square <receipts@messaging.squareup.com>

Wed, Jun 12, 2019 at 1:2

Reply-To: Bubbles Dog Grooming and Spa via Square

<CAESOhIAGixyX21memVnNXp3bW15aGl6bGtucmNneXZkZ25yMmVzdXp1bjVpeGU1c25peSIIZGIhbG9ndWUilGLnJMNBNBICzeeV3hmfDfgdFF7K2hHFqf1CSAiv+usVj@reply2.squareup.

To: aleciadraper@gmail.com

Square automatically sends receipts to the email address you used at any Square seller. [Learn more](#)

Bubbles Dog Grooming and Spa

How was your experience?



\$99.60

Custom Amount	\$83.00
Purchase Subtotal	\$83.00
Tip	\$16.60
Total	\$99.60



Bubbles Dog Grooming and Spa
18853 Milos Circle
HUNTINGTN BCH, CA 92648

MasterCard 0036 (Chip) Jun 12 2019 at 1:19 PM

#Cw6c

EMILY REED Auth code: 07696Z

AID: A0000000041010

Signature Verified

Run your own business?
Start using Square and process \$1,000 in
sales for free.

Get Started with Square

EXHIBIT 60

EXHIBIT 60

EXHIBIT 60
RESP'T APP 2248

This contract is executed on the 6 day of Feb, 2016, between OkiePups (

and Alecia Draper (buyer).



Seller certifies that this puppy is of sound health at the time of sale. Puppy will have received all appropriate shots and worming prior to delivery, and written vaccination records will be provided. Puppy is guaranteed for 2 years from date of birth to be free of any life threatening genetic disorders. Upon receipt of written proof of such disorders from a licensed veterinarian and return of the puppy within 7 days of diagnosis, seller will provide a full refund or exchange the puppy as soon as one is available. Seller also retains the right to get a second opinion at our expense.

Buyer must have puppy examined by a licensed veterinarian within 3 business days of the date and time of delivery at his own expense. If within that time period the puppy is declared to be in a life threatening condition by a licensed veterinarian, the report and puppy must be returned to seller within 24 hours after the veterinarian has examined the puppy and made the report. Upon receipt of the veterinarian's report and the puppy a full refund or exchange will be made.

Completing puppy vaccination series and annual booster shots are required. Failure to provide proper care and health management shall void this agreement. No guarantee is made on problems not detected by a licensed veterinarian.

Minor health problems that can be cured by medication such as coccidia, giardia, diarrhea, wormy stool, ear mites, external parasites, or other common problems are the responsibility of the buyer.

Seller is not responsible for any accidents that happen after puppy leaves seller's possession.

While our puppies usually are low-to-no shedding and friendly to those with allergies, no guarantees or refunds can be made based on shed levels, coat types, or allergies. In addition, size at maturity cannot be guaranteed.

Puppy is being sold as a pet only. Breeding rights will be given with approval only and with an additional cost. Buyer has 6 months from the date of birth to provide written verification to OkiePups that spaying or neutering has been performed. If seller has not received such verification within the 7th month after date of birth, the health guarantee is forfeited.

A \$300 non-refundable deposit is required to reserve a puppy. Pick of the litter is first come first serve based on when deposit is received. Balance is due when selection is made at 4-5 weeks.

Airline shipping (flights to major airports only) is available if required and is not included in the price of the puppy. Buyer's cost for shipment is \$350, which includes airfare, crate, water bottle, and health certificate.

Payments can be made with cash (in person only), money order, or PayPal at www.paypal.com. PayPal must include an additional 3% of the total charges to cover PayPal expense. PayPal payments can be sent to jeanette@okiepups.com. Money orders can be sent to the mailing address below payable to Jeanette Zeller. NO CHECKS PLEASE!

To reserve your puppy, please print, sign, and mail, email or fax this contract, and send your deposit via mail or PayPal. A written confirmation will be sent via email. Thank you for your business.

Seller

Jeanette Zeller, Okiepups

8801 NE 122nd St

Jones, OK 73049

Phone, 405-414-2401

Fax (866) 861-1915

Buyer

Name Alecia Draper

Address

Phone

Email

Ship

Jeanette Zeller 2-16-16
Seller Signature Date

Buyer Signature Date

Color BK ☒ Male ☐ Female Goldendoodle Labradoodle DoubleDoodle EDF1b F2 DOB 12-22-15 ID S2Y151222
F1

Puppy price \$ 1200

Shipping (\$350) \$ _____

Microchip (\$30) \$ 30

Board (\$5 day) \$ _____

PayPal fee

(3% of above) \$ _____

Total Due \$ _____

Deposit of \$ 300 received on 2-6-16

Payment of \$ 300 received on 2-19-16

Payment of \$ 300 received on 2-13-16

300

PP.

RESP'T APP 2249

F. PTSD
ER-001022

EXHIBIT 61

EXHIBIT 61

EXHIBIT 61
RESP'T APP 2250



CORONA DEL MAR
ANIMAL HOSPITAL & BOARDING KENNEL

BILL TO
Emily Reed
[REDACTED]

2948 East Coast Highway
Corona Del Mar, California, 92625
Ph: (949) 644-8160
Fax: (949) 644-8515
Email: cdmahreception@gmail.com

INVOICE 1269579
DATE: 04-16-2019
DUE DATE 04-16-2019
CUSTOMER ID: 209312
ORDER #:
ANIMAL: Monarch
CLINICAL #: Dr. Frances Tiberi

DESCRIPTION	QTY	DISC.	DISC. (\$)	TOTAL
Examination, Wellness	1			\$65.00
Ova and Parasite/Giardia (ELISA) (ANT)	1			\$59.00
Vanguard-B (Intranasal) 1-year (Per Dose)	1			\$23.00
Medical Waste Disposal	1	30.00%	\$1.50	\$3.50
Trazodone 100mg (Per Tablet)	10			\$16.97
Sarolaner 80mg Chew 44.1-88lb 6ct (Per Box)	1			\$117.36
Ivermectin/Pyrantel Plus Brown [50-100lbs] 6ct (Per Box)	1			\$59.99

PAYMENT TERMS: COD

Payment in full is expected upon completion of treatment.
Administration fees and collection fees will be applied to
overdue accounts.

Subtotal \$344.82
Inc. TAX \$0.00
Total \$344.82
Paid \$344.82
Due \$0.00

RESP'T APP 2252



CORONA DEL MAR
ANIMAL HOSPITAL & BOARDING KENNEL

Corona del Mar Animal Hospital
(949) 644-8160
2948 East Coast Highway
Corona Del Mar, California, 92625
cdmahreception@gmail.com

Payment Receipt

Client No. [REDACTED]

Client Reed, Emily

Amount \$344.82

Method Mastercard

Comments

Receipt No.

618658

Date

04-16-2019

Date

04-16-2019

Record Paid

1269579

Total

\$344.82

Paid

\$344.82

RESP'T APP 2253

ER 001025

INVOICE

Corona Del Mar Animal Hosp

2948 East Coast Highway
Corona Del Mar, CA 92625
949-644-8160

Printed:
06-11-19 at 2:33p

FOR:
Emily Reed

Date:
06-11-18
20762 Crestview lane

Account:
8819
Huntington Beach, CA 92646

Invoice:
184614
(714) 465-7489

Date
For

Description	Qty	Net Price
06-11-18 Monarch	1	
Heartworm Blood Test		46.00
06-11-18	1	
Blood Collection Fee		17.50
06-11-18 Mastercard payment		-63.50

Merchant ID: 529000246177, Approval code: 01189Z, Transaction ID: 809114742
Ref #: 168893, Act #: *****0036, Exp: XX/XX, Entry: SWIPED, Card: MASTERCARD
Your card balance is not available
I AGREE TO PAY ABOVE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT

X _____



Old balance			
	Charges		
		Payments	
			New balance
0.00			
	63.50		
		63.50	
			0.00

Reminders for:
Monarch
(Weight: 50.4 lbs - 3y)
Last done
04-04-20
Parvo Vaccine (3 Year)
04-05-17
04-04-20
DHP (3yr vaccine)
04-05-17
04-04-20
Rabies (3 Year) Vaccination
04-05-17
06-11-19
Heartworm Blood Test
06-11-18
04-23-19
Fecal Combo
04-23-18
04-23-19
Exam- Canine Annual Health Scr

RESP'T APP 2254

ER 001026

RESP'T APP 2255

ER 001027

INVOICE

Corona Del Mar Animal Hosp

2948 East Coast Highway
Corona Del Mar, CA 92625
949-644-8160

Printed:

06-11-19 at 2:39p

FOR:

Emily Reed

Date:

04-23-18

20762 Crestview lane

Account:

8819

Huntington Beach, CA 92646

Invoice:

180855

(714) 465-7489

Date

For

Description	Qty	Net Price
04-23-18 Monarch	1	
Canine Annual Health Screening Exam		64.00
04-23-18	1	
Bordetella Vaccine (Annual)		23.00
04-23-18	1	
Hazardous Waste/Needle Disposal - Single		3.50
04-23-18	1	
Fecal Combo		55.00
04-23-18	6	
Trifexis 40.1-60# Blue #16173		125.00
04-23-18	1	
Large Bully Stick*		6.00
04-23-18 Visa payment		-276.96

Merchant ID: 529000246177, Approval code: 023269, Transaction ID: 575350980

Ref #: 185198, Act #: *****5602, Exp: XX/XX, Entry: SWIPED, Card: VISA

Your card balance is not available

I AGREE TO PAY ABOVE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT

X _____



Old balance

Charges

Tax

Payments

RESP'T APP 2256

ER 001028

New balance

0.00

276.50

*0.46

276.96

0.00

Reminders for:

Monarch

(Weight: 50.4 lbs - 3y)

Last done

04-04-20

Parvo Vaccine (3 Year)

04-05-17

04-04-20

DHP (3yr vaccine)

04-05-17

04-04-20

Rabies (3 Year) Vaccination

04-05-17

06-11-19

Heartworm Blood Test

06-11-18

04-23-19

Fecal Combo

04-23-18

04-23-19

Exam- Canine Annual Health Scr

04-23-18

04-23-19

Bordetella Vaccine (Annual)

04-23-18

Previous Page — Next Page

RESP'T APP 2257

ER 001029

INVOICE

Corona Del Mar Animal Hosp

2948 East Coast Highway
Corona Del Mar, CA 92625
949-644-8160

Printed:

06-11-19 at 2:41p

FOR:

Emily Reed

Date:

04-05-17

20762 Crestview lane

Account:

8819

Huntington Beach, CA 92646

Invoice:

150909

(714) 465-7489

Date

For

Description	Qty	Net Price
04-05-17 Monarch	1	
Canine Annual Health Screening Exam		59.00
04-05-17	1	
Hazardous Waste/Needle Disposal-Multiple		4.50
04-05-17	1	
Rabies (3 Year) Vaccination		26.00
04-05-17	1	
Bordetella Vaccine (Annual)		21.00
04-05-17	1	
Parvo Vaccine (3 Year)		21.00
04-05-17	1	
DHP Vaccine (3 Year)		28.00
04-05-17	1	
Fecal Combo		47.75
04-05-17	1	
Heartworm Blood Test		44.00
04-05-17	6	
Trifexis 40.1-60# Blue #476		

23
RESP'T APP 2258

ER 001030

04-05-17
Visa payment

-100.00

Merchant ID: 529000246177, Approval code: 010934, Transaction ID: 1824265917
Ref #: 136012, Act #: *****3039, Exp: XXXX, Entry: SWIPED, Card: VISA
Your card balance is not available
I AGREE TO PAY ABOVE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT

X _____



04-05-17
Mastercard payment

-274.25

Merchant ID: 529000246177, Approval code: 01521Z, Transaction ID: 1824267742
Ref #: 136013, Act #: *****0036, Exp: XXXX, Entry: SWIPED, Card: MASTERCARD
Your card balance is not available
I AGREE TO PAY ABOVE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT

X _____



Previous Page — Next Page

RESP'T APP 2259

ER 001031

Old balance

Charges

Payments

New balance

0.00

374.25

374.25

0.00

Reminders for:

Monarch

(Weight: 50.4 lbs - 3y)

Last done

04-04-20

Parvo Vaccine (3 Year)

04-05-17

04-04-20

DHP (3yr vaccine)

04-05-17

04-04-20

Rabies (3 Year) Vaccination

04-05-17

06-11-19

Heartworm Blood Test

06-11-18

04-23-19

Fecal Combo

04-23-18

04-23-19

Exam- Canine Annual Health Scr

04-23-18

04-23-19

Bordetella Vaccine (Annual)

04-23-18

Previous Page — Next Page

RESP'T APP 2260

ER 001032

INVOICE

Corona Del Mar Animal Hosp

2948 East Coast Highway
Corona Del Mar, CA 92625
949-644-8160

Printed:

06-11-19 at 2:51p

FOR:

Emily Reed

Date:

04-29-16

20762 Crestview lane

Account:

8819

Huntington Beach, CA 92646

Invoice:

124511

(714) 465-7489

Date**For**

Description	Qty	Net Price
04-29-16 Monarch	1	
Bath		34.00
04-29-16	1	
Trim Face		8.00
04-29-16	1	
Nail Trim		13.00
04-29-16	1	
Fecal Combo		47.75
04-29-16	1	
Examination-Normal Visit		59.00
04-29-16	1	
DHP Puppy Final		22.00
04-29-16	1	
Parvo Puppy Final		16.00
04-29-16	1	
Bordetella Puppy #2		21.00
04-29-16	1	
Rabies (1 Year) Vaccination		

28.45
RESP'T APP 2261

ER 001033

04-29-16

1

Hazardous Waste/Needle Disposal-Multiple

4.50

04-29-16

1

Ear Cleaning - Minor

10.00

04-29-16

6

Trifexis 20.1-40# Green

117.00

04-29-16

1

Epi-Otic Adv Ear Cleaner 8oz*

20.70

04-29-16

Visa payment

-100.00

Merchant ID: 529000246177, Approval code: 007686, Transaction ID: 1419332919

Ref #: 110841, Act #: *****3039, Exp: XX/XX, Entry: SWIPED, Card: VISA

Your card balance is not available

I AGREE TO PAY ABOVE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT

X _____



04-29-16

Mastercard payment

-300.61

Merchant ID: 529000246177, Approval code: 06041Z, Transaction ID: 1419336491

Ref #: 110842, Act #: *****0036, Exp: XX/XX, Entry: SWIPED, Card: MASTERCARD

Your card balance is not available

I AGREE TO PAY ABOVE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT

Previous Page ----- Next Page

RESP'T APP 2262

ER 001034

X _____



Old balance

Charges

Tax

Payments

New balance

0.00

398.95

*1.66

400.61

0.00

Reminders for:

Monarch

(Weight: 50.4 lbs - 3y)

Last done

04-04-20

Parvo Vaccine (3 Year)

04-05-17

04-04-20

DHP (3yr vaccine)

04-05-17

04-04-20

Rabies (3 Year) Vaccination

04-05-17

06-11-19

Heartworm Blood Test

06-11-18

04-23-19

Fecal Combo

04-23-18

04-23-19

Exam- Canine Annual Health Scr

04-23-18

04-23-19

Bordetella Vaccine (Annual)

04-23-18

Previous Page — Next Page

RESP'T APP 2263

ER 001035

EXHIBIT 62

EXHIBIT 62

EXHIBIT 62
RESP'T APP 2264

AAA Animal Hospital

Page 1 / 1

21632 Newland Street
Huntington Beach, CA 92646
(714) 536-6537

AAA ANIMAL HOSPITAL
21632 NEWLAND ST
HUNTINGTON BE, CA 92646

12/15/2016

16:18:48

CREDIT CARD

MC SALE

Client ID: 63018

Invoice #: 196958

Date: 12/15/2016

CARD # XXXXXXXXXXXXX0036

Chip Card: CAPITAL ONE

Chip Card AID: A0000000041010

ATC: 0044

IC: 4EA1CCBAFE2763C0

NVOICE 0048

SEQ #: 0046

Batch #: 000650

Approval Code: 05446Z

Entry Method: Chip Read

Code: Issuer R

SALE AMOUNT \$44.00

Species: Canine Weight: 44.60 pounds
Breed: Goldendoodle Birthday: 12/21/2015 Sex: Female

Staff Name	Quantity	Total
Samir Botros, DVM	2.00	\$44.00

Patient Subtotal: \$44.00

Invoice Total: \$44.00

Total: \$44.00

Balance Due: \$44.00

Previous Balance: \$0.00

Balance Due: \$44.00

Master Card: (\$44.00)

Less Payment: (\$44.00)

Balance Due: \$0.00

CUSTOMER COPY

If you have an after hours emergency, please contact VCA All-Canine at 714-961-1900.
There is no staff on the property after hours. Thank you

RESP'T APP 2265

ER 001036

AAA ANIMAL HOSPITAL
21632 NEWLAND ST
HUNTINGTON BE, CA 92646

AAA Animal Hospital
21632 Newland Street
Huntington Beach, CA 92646
(714) 536-6537

10/11/2016

13:15:07

CREDIT CARD

MC SALE

CARD # XXXXXXXXXXXXX0036
Chip Card: CAPITAL ONE
Chip Card AID: A0000000041010
ATC: 002A
TC: D47285B586CC316B
INVOICE 0023
SEQ #: 0023
Batch #: 000586
Approval Code: 052362
Entry Method: Chip Read
Mode: Issuer

SALE AMOUNT \$22.00

Client ID: 63018
Invoice #: 192487
Date: 10/11/2016

Species: Canine Weight: 44.60 pounds
Breed: Goldendoodle Birthday: 12/21/2015 Sex: Female

<u>Staff Name</u>	<u>Quantity</u>	<u>Total</u>
Samir Botros, DVM	1.00	\$22.00
Patient Subtotal:		\$22.00

CUSTOMER COPY

Invoice Total:	\$22.00
Total:	\$22.00
Balance Due:	\$22.00
Previous Balance:	\$0.00
Balance Due:	\$22.00
Master Card:	(\$22.00)
Less Payment:	(\$22.00)
Balance Due:	\$0.00

RESP'T APP 2266

If you have an after hours emergency, please contact VCA All-Care at 714-963-0909.
There is no staff on the property after hours. Thank you

ER 001037

AAA ANIMAL HOSPITAL
21632 NEWLAND ST
HUNTINGTON BE, CA 92646

AAA Animal Hospital
21632 Newland Street
Huntington Beach, CA 92646
(714) 536-6537

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10/10/2016

21:16:18

CREDIT CARD

AMEX SALE

CARD # XXXXXXXXXXXX1011
Chip Card: AMERICAN EXPRESS
Chip Card Atr A000000025010801
ATC: 0015
TC: 306Ltr 187CAEE
INVT: 0068
SEQ: 0067
Batr: 000585
Approval Code: 843026
Entry Method: Chip Read
Mode: Issuer
SALE AMOUNT \$346.00 e

Client ID: 63018

Invoice #: 192459

Date: 10/10/2016

Species: Canine Weight: 44.60 pounds
Breed: Goldendoodle Birthday: 12/21/2015 Sex: Female

Staff Name	Quantity	Total
Samir Botros, DVM	1.00	\$25.00
	1.00	(\$25.00)
	1.00	\$130.00
	1.00	\$110.00
	1.00	\$35.00
	1.00	\$35.00
	1.00	\$36.00

Patient Subtotal: \$346.00

CUSTOMER COPY

Your pet was given an antibiotic injection today. If you were sent home with oral antibiotics, please do not start them until tomorrow morning.

Reminder

10/10/2017 YEARLY PHYSICAL REMINDER

Invoice Total:	\$346.00
Total:	\$346.00
Balance Due:	\$346.00
Previous Balance:	\$0.00
Balance Due:	\$346.00
American Express:	(\$346.00)
Less Payment:	(\$346.00)
Balance Due:	\$0.00

If you have an after hours emergency, please contact VCA All-Canine at 714-961-1901.
There is no staff on the property after hours. Thank you

RESP'T APP 2267

ER 001038

EXHIBIT 63

EXHIBIT 63

EXHIBIT 63
RESP'T APP 2268

SIT MEANS SIT DOG TRAINING

SERVICE AGREEMENT

Services: Sit Means Sit Dog Training (the "Trainer") shall provide dog training services and equipment to Client pursuant to the program and on the terms set forth under Training Program/Terms below. The Training Program shall include the purchase of one electronic training collar with transmitter ("Equipment"), and individual instruction to Client on the use of the equipment and methods of training the pet.

Scheduling: All training sessions are scheduled by appointment and Client is responsible for contacting the office, office telephone number is (719) 636-3647. A portion of the Program may be conducted privately or in small groups.

Indemnification/Liability: Client is responsible for the control, conduct and training of the Pet. Client is solely liable for any injury to persons or damage to property caused by the Pet. Client holds harmless and shall indemnify and defend Sit Means Sit and trainer from any and all injuries or damage caused by the Pet whatsoever. Client agrees that although Trainer can provide equipment and instruction for the training of the Pet, Trainer does not maintain control of the Pet, and Client is responsible for the successful training, control and conduct of the Pet at all times. If the Pet is aggressive, Client shall place a muzzle on the Pet during all training sessions and Client shall be responsible for avoiding potentially problematic situations. Client shall follow all instructions for the Equipment and shall not leave the Equipment on the Pet unattended or overnight.

Results: All dogs have different temperaments and their owners vary in ability and willingness to follow the Program; therefore, results will vary. At the conclusion of the private sessions, Trainer will have Client demonstrate the training skills learned by the Pet. These skills shall include obedience to certain verbal commands and response to proper use of the Equipment. If Client follows the training instructions provided and at the conclusion of the Program the Pet fails to perform the skills required, at Client's option, Trainer will continue to work with the Client and Pet.

Images: Trainer may photograph and/or video tape training sessions for future use in training, advertising or other purposes. Client consents to Trainer's use of images of Client and the Pet in such manner.

Payment: The full training fee set forth under Terms above is due prior to delivery of Equipment or provision of any instruction. The full training fee is deemed earned upon delivery of the Equipment. A charge of \$50 shall be charged for any check returned unpaid by your financial institution for any reason. Should a check be returned, all instruction shall be discontinued until the training fee and return check fee are paid in full. Should collection efforts become necessary, Trainer may recover all costs of collection, including reasonable attorney fees.

Print Client Name Franco, David
Client Signature [Signature]

Date 5-20-10

CONF 5062684
48 Hours

Ken

714-794-9635

Payment:	CHECK	<u>CREDIT CARD</u>	CASH
Equipment	<u>240</u>	CC#	<u>[Redacted]</u>
Training	<u>1550</u>	Exp	<u>[Redacted]</u>
Total	<u>1790</u>	Dates	<u>[Redacted]</u>
PIF:	<u>YES</u>	NO	
Authorization Signature		<u>RESP'T APP 2269</u>	

ER 001039

EXHIBIT 64

EXHIBIT 64

EXHIBIT 64
RESP'T APP 2270

Twin Peaks Veterinary Center

1/2/2017

Page 1 / 2

7555 W Twin Peaks
Suite 101
Tucson, AZ 85743
(520) 572-8300

Liz Olden

Client ID: 12860

Estimate ID: 55220

Expiration Date: 12/30/2017

Patient ID: 20813	Species: Canine	Weight: 47.00 pounds	Sex: Female
Patient Name: Monarch	Breed: Golden Doodle	Birthday: 01/09/2016	

Item ID	Description	Staff Name	Low Qty.	Low Amount	High Qty.	High Amount
EXAM	Courtesy Examination	Dr. Laura Battrow	1.00	\$0.00	1.00	\$0.00
4155	Twin Peaks Pre-Surgical		1.00	\$0.00	1.00	\$0.00
247	Canine Spay Large		1.00	\$350.00	1.00	\$350.00
1532	Premedication Injection		1.00	\$0.00	1.00	\$0.00
1533	NSAID Pain Injection		1.00	\$0.00	1.00	\$0.00
422	Antibiotic Injection		1.00	\$0.00	1.00	\$0.00
252	Surgical Monitoring and Nursing Care		1.00	\$0.00	1.00	\$0.00
245	IV catheter and Fluids		1.00	\$0.00	1.00	\$0.00
706	Pain Medication Post Surgical		1.00	\$0.00	1.00	\$0.00
718	Laser Therapy Pain Managment		1.00	\$0.00	1.00	\$0.00
ECOL	30cm E-Collar		1.00	\$15.46	1.00	\$15.46
1250	Complimentary Anal Glands		1.00	\$0.00	1.00	\$0.00
1251	Complimentary Ear Cleaning		1.00	\$0.00	1.00	\$0.00
1249	Complimentary Nail Trim		1.00	\$0.00	1.00	\$0.00
313	Microchip & Registration		1.00	\$25.74	1.00	\$25.74
MSCMI	Medication to go home		1.00	\$30.00	1.00	\$60.00

Low Subtotal: \$421.20 High Subtotal: \$451.20

Tax: \$1.33 Tax: \$1.33

Low Total: \$422.53 High Total: \$452.53

I accept this estimate and the charges detailed within it. This estimate is good for 30 days. I understand that a deposit for services may be required and that payment is due when services are rendered. It has been explained to me that Twin Peaks Veterinary Center does not offer payment plans and that staff is not present during the hours the clinic is closed.

Signed: _____

RESP'T APP 2271

Twin Peaks Veterinary Center is proud to be an accredited member of the American Animal Hospital Association.

All estimates are valid for 30 days from the day they were generated. Please note that as of January 1, 2017, we no longer accept checks.

EP-001040

Twin Peaks Veterinary Center

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TWIN PEAKS VETERINARY

7555 W TWIN PEAKS RD#101

7555 W Twin Peaks

Suite 101

Tucson, AZ 85743

(520) 572-8399

TUCSON AZ 85743

5205728300

Cashier: Beth Neuman

Transaction 012977

Client ID: 12860

Invoice #: 93954

Date: 2/9/2017

Total \$75.00**DEBIT CARD SALE \$75.00**Retain this copy for statement
validation

09 Feb 2017 12:50:20P

\$75.00 | Method: EMV

US DEBIT XXXXXXXXXXXX7603

ELIZABETH OLDEN

Ref #: 704000542550

Auth #: 862962

MID: *****5998

AID: A0000000980840

AthNtwkNm: VISA

RtInd:CREDIT

SIGNATURE VERIFIED

Online: [https://clover.com/p/
PXSDW21C6TDMR](https://clover.com/p/PXSDW21C6TDMR)

PXSDW21C6TDMR

Species: Canine	Weight: 47.90 pounds
Breed: Golden Doodle	Birthday: 12/21/2015 Sex: Spayed Female

	Quantity	Total
3 months	1.00	\$61.19
Brush & Clip	1.00	\$65.00
Patient Subtotal:		\$126.19

Vaccination
 a Oral
 Vaccination 3y
 (P + Giardia)
 Comprehensive
 Physical/NSAID Profile
 Surgical

Invoice Total: \$126.19

Total: \$126.19

Balance Due: \$126.19

Previous Balance: \$0.00

Balance Due: \$126.19

Credit Card: (\$51.19)

Credit Card: (\$75.00)

Less Payment: (\$126.19)

Balance Due: \$0.00**RESP'T APP 2272**

Twin Peaks Veterinary Center is proud to be an accredited member of the American
 Animal Hospital Association, and we thank you for choosing us to care for your
 family. We appreciate your business.

ER 001041

Please note as of January 1, 2017, we will no longer accept checks.

Twin Peaks Veterinary Center

7555 W Twin Peaks
Suite 101
Tucson, AZ 85743
(520) 572-8300

Page 2 / 2

Liz Olden


Client ID: 12860

Invoice #: 91597

Date: 1/3/2017

Open Invoice

Invoice Total:	\$291.71
Default Tax Rate :	\$1.33
Total:	<u>\$293.04</u>
Balance Due:	\$293.04
Previous Balance:	<u>(\$200.00)</u>
Balance Due:	<u><u>\$93.04</u></u>

Scheduled Appointments:

Appt. for Monarch on 1/16/2017 at 02:30 pm.

Twin Peaks Veterinary Center is proud to be an accredited member of the American
Animal Hospital Association, and we thank you for choosing us to care for your
family. We appreciate your business.

RESPT APP 2273

Please note as of January 1, 2017, we will no longer accept checks.

ER 001042

Twin Peaks Veterinary Center

7555 W Twin Peaks
Suite 101
Tucson, AZ 85743
(520) 572-8300

Page 1 / 1

Liz Olden

Client ID: 12860
Invoice #: 91482
Date: 1/2/2017

Patient ID: 20813	Species: Canine	Weight: 47.00 pounds
Patient Name: Monarch	Breed: Golden Doodle	Birthday: 12/21/2015 Sex: Female
<u>Description</u>	<u>Quantity</u>	<u>Total</u>
1/2/2017 Examination, Comprehensive	1.00	\$47.50
Patient Subtotal:		\$47.50

Instructions

Please do not give your pet any Aspirin, Tylenol, Aleve, Ibuprofen or other non-steroidal anti-inflammatories. These can be potentially fatal to cats and dogs. If you have any concerns please contact our clinic at 572-8300.

Reminder

04/29/2017 Annual DAP Vaccination
Vaccine, Bordetella Oral
Canine Rabies Vaccination 3y
07/09/2017 Fecal Analysis (O&P + Giardia)
01/02/2018 Examination, Comprehensive

Invoice Total:	\$47.50
Total:	\$47.50
Invoice Balance Due:	\$47.50
Credit Card:	(\$47.50)
Less Payment:	(\$47.50)
Invoice Balance Due:	\$0.00
Balance Due:	\$0.00

Scheduled Appointments:

Appt. for Monarch on 1/3/2017 at 08:15 am.

Twin Peaks Veterinary Center is proud to be an accredited member of the American Animal Hospital Association, and we thank you for choosing us to care for your family. We appreciate your business.

RESP APP 2274

Please note as of January 1, 2017, we will no longer accept checks.

ER 001043

Twin Peaks Veterinary Center

7555 W Twin Peaks
Suite 101
Tucson, AZ 85743
(520) 572-8300

Page 1 / 1

Liz Olden


Client ID: 12860

Invoice #: 91485

Date: 1/2/2017

Patient ID: 20813	Species: Canine	Weight: 47.00 pounds
Patient Name: Monarch	Breed: Golden Doodle	Birthday: 12/21/2015 Sex: Female

	<u>Description</u>	<u>Quantity</u>	<u>Total</u>
1/2/2017	Wellness/Pre-Surgical/NSAID Profile	1.00	\$90.25
Patient Subtotal:			\$90.25

Reminder

04/29/2017 Annual DAP Vaccination
Vaccine, Bordetella Oral
Canine Rabies Vaccination 3y
07/09/2017 Fecal Analysis (O&P + Giardia)
01/02/2018 Examination, Comprehensive
Wellness/Pre-Surgical/NSAID Profile

Invoice Total:	\$90.25
Total:	\$90.25
Balance Due:	\$90.25
Previous Balance:	\$0.00
Balance Due:	\$90.25
Credit Card:	(\$90.25)
Less Payment:	(\$90.25)
Balance Due:	\$0.00

Scheduled Appointments:

Appt. for Monarch on 1/3/2017 at 08:15 am.

Twin Peaks Veterinary Center is proud to be an accredited member of the American
Animal Hospital Association, and we thank you for choosing us to care for your
family. We appreciate your business.

Please note as of January 1, 2017, we will no longer accept checks.

ER 001044

Twin Peaks Veterinary Center

7555 W Twin Peaks
Suite 101
Tucson, AZ 85743
(520) 572-8300

Page 1 / 1

Liz Olden

Client ID: 12860

Invoice #: 81589

Date: 7/9/2016

Patient ID: 20813	Species: Canine	Weight: 38.70 pounds
Patient Name: Monarch	Breed: Golden Doodle	Birthday: 01/09/2016 Sex: Female
Description	Quantity	Total
7/9/2016 Examination, Comprehensive	1.00	\$47.50
Fecal Analysis (O&P + Giardia)	1.00	\$34.66
Provable Kit Medium to Large Dog	1.00	\$24.09 T
Minocycline 100mg capsules	20.00	\$26.10
Patient Subtotal:		\$132.35

Instructions

Please do not give your pet any Aspirin, Tylenol, Aleve, Ibuprofen or other non-steroidal anti-inflammatories. These can be potentially fatal to cats and dogs. If you have any concerns please contact our clinic at 572-8300.

Reminder

07/09/2017 Examination, Comprehensive
Fecal Analysis (O&P + Giardia)

Invoice Total:	\$132.35
Default Tax Rate :	\$2.07
Total:	\$134.42
Balance Due:	\$134.42
Previous Balance:	\$0.00
Balance Due:	\$134.42
Credit Card:	(\$134.42)
Less Payment:	(\$134.42)
Balance Due:	\$0.00

Twin Peaks Veterinary Center is proud to be an accredited member of the American Animal Hospital Association. Our doctors and staff thank you for choosing Twin Peaks Veterinary Center. We appreciate your business and enjoy providing care for your pets.

RESP'T APP 2276

ER 001045

EXHIBIT 65

EXHIBIT 65

EXHIBIT 65
RESP'T APP 2277

BEACH CITY ANIMAL HOSP
7412 WARNER AVE
HUNTINGTON BE, CA 92647

3/30/2016

14:36:04

CREDIT CARD

MC SALE

Chip Card: XXXXXXXXXXXX0036
Chip Card ATD: CAPITAL ONE
ATC: A0096000011010
TC: 000E
INVOICE: A8485BFFAAE16D2B
SEQ #: 0013
Batch #: 000110
Approval Code: 081942
Entry Method: Chip Read
Mode: Issuer

SALE AMOUNT \$35.00

CUSTOMER COPY



INVOICE

FOR

Alecia Draper

DATE	TERMS
3/30/2016	Due upon receipt

DESCRIPTION OF CHARGES	PERFORMED	QUANTITY	AMOUNT
Fecal - Ova & Parasites w/ Giardia (T808)	3/30/2016	1	35.00
Sales tax			0.00
TIENT SUBTOTALS			\$35.00
March			\$35.00
INVOICE TOTAL			\$35.00
PAYMENT - CREDIT CARD			35.00
APPLIED TO INVOICE			35.00
CREDIT APPLIED TO ACCOUNT			0.00
CHANGE DUE			0.00
RUNNING BALANCE			\$0.00

Payments and Credits for #39014

PMT INV

03/30/2016

Credit Card

-35.00

NOTES

REMINDERS

Monarch	4/14/2016	Bordetella Vaccine
Monarch	4/14/2016	DAVPPV Vaccine
Monarch	3/30/2017	Fecal - Ova & Parasites w/ Giardia (T808)

APPOINTMENTS

RESP'T APP 2278

Thank you for the opportunity to serve you today.

ER 001046

INVOICE

BEACH CITY ANIMAL HC..
7412 WARNER AVE
HUNTINGTON BE, CA 92647
3/16/2016 13:57:25



CREDIT CARD
MC SALE

CARD # XXXXXXXXXXXX0036
Chip Card: CAPITAL ONE
Chip Card AID: A0000000011010
ATC: 000B
TC: 4503C9D48329520F
INVOICE 0006
SEQ #: 0006
Batch #: 000097
Approval Code: 018022
Entry Method: Chip Read
Mode: Issuer

SALE AMOUNT \$19.27

FOR
Alecia Draper
[REDACTED]

DATE	TERMS
3/16/2016	Due upon receipt

DESCRIPTION OF CHARGES	PERFORMED	QUANTITY	AMOUNT
Panacur 1 Gram, 3 Pkts	3/16/2016	2.33 box	19.27
Sales tax			0.00

ATTIENT SUBTOTALS	INVOICE TOTAL	\$19.27
Monarch	PAYMENT - CREDIT CARD	19.27
	APPLIED TO INVOICE	19.27
	CREDIT APPLIED TO ACCOUNT	0.00
	CHANGE DUE	0.00
	RUNNING BALANCE	\$0.00

CUSTOMER COPY

Payments and Credits for #38440			
PMT INV	03/16/2016	Credit Card	-19.27

NOTES

REMINDERS

Monarch	4/14/2016	Bordetella Vaccine
Monarch	4/14/2016	DAVPPV Vaccine
Monarch	3/14/2017	Fecal - Ova & Parasites w/ Giardia (T808)

APPOINTMENTS

RESP'T APP 2279

Thank you for the opportunity to serve you today.

ER 001047

BEACH CITY ANIMAL HOSP
7412 WARNER AVE
HUNTINGTON BE, CA 92647

3/14/2016

15:00:20

CREDIT CARD

MC SALE



INVOICE

CARD # XXXXXXXXXXXXXXXX
Chip Card. CAPITAL ONE
Chip Card AID A0000000041010
ATC: 000A
IC: 9490924DB818E7C8
INVOICE 0011
SEQ #: 0011
Batch #: 000096
Approval Code: 00644Z
Entry Method: Chip Read
Mode: Issuer

SALE AMOUNT \$73.75

CUSTOMER COPY

DATE	TERMS
3/14/2016	Due upon receipt

FOR
Alecia Draper
[REDACTED]

DESCRIPTION OF CHARGES	PERFORMED	QUANTITY	AMOUNT
Fecal - Ova & Parasites w/ Giardia (T808)	3/14/2016	1	35.00
DAVPPV+Bord Vaccine	3/14/2016	1	
DAVPPV Vaccine	3/14/2016	1	
Bordetella Vaccine	3/14/2016	1	
DAVPPV+Bord Vaccine			35.50
OSHA Compliance/BioHazard	3/14/2016	1	3.25
Sales tax			0.00

PATIENT SUBTOTALS

Monarch \$73.75

INVOICE TOTAL	\$73.75
PAYMENT - CREDIT CARD	73.75
APPLIED TO INVOICE	73.75
CREDIT APPLIED TO ACCOUNT	0.00
CHANGE DUE	0.00
RUNNING BALANCE	\$0.00

Payments and Credits for #38357

PMT INV

03/14/2016

Credit Card

-73.75

NOTES

REMINDERS

Monarch	4/14/2016	Bordetella Vaccine
Monarch	4/14/2016	DAVPPV Vaccine
Monarch	3/14/2017	Fecal - Ova & Parasites w/ Giardia (T808)

APPOINTMENTS

RESP'T APP 2280

Thank you for the opportunity to serve you today.

ER 001048

CREDIT CARD

MC SALE

INVOICE

ARJ # XXXXXXXXX
 Hip Card: CAPITAL C
 Hip Card AID A0000000041010
 TC: 0009
 C: 196689283976C316
 NVOICE 0006
 IEQ #: 0006
 Patch #: 000089
 Approval Code: 055322
 Entry Method: Read
 Mode: issuer
 SALE AMOUNT \$16.54



DATE	TERMS
3/5/2016	Due upon receipt

FOR
Alecia Draper
[REDACTED]

CUSTOMER COPY

DESCRIPTION OF CHARGES	PERFORMED	QUANTITY	AMOUNT
Panacur 1 Gram, 3 Pkts	3/5/2016	2 box	16.54
Sales tax			0.00

PATIENT SUBTOTALS

Monarch \$16.54

INVOICE TOTAL \$16.54
 PAYMENT - CREDIT CARD 16.54
 APPLIED TO INVOICE 16.54
 CREDIT APPLIED TO ACCOUNT 0.00
 CHANGE DUE 0.00

RUNNING BALANCE \$0.00

Payments and Credits for #38094

PMT INV	03/05/2016	Credit Card	-16.54
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NOTES

REMINDERS

Monarch	3/3/2017	Fecal - Ova & Parasites w/ Giardia (T808)
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APPOINTMENTS

RESP'T APP 2281

Thank you for the opportunity to serve you today.

ER 001049

INVOICE

CALHUN ANIMAL HOSP
7412 WARNER AVE
STINGTON BE, CA 92647

02/26/2016 17:53:10

CREDIT CARD
VISA SALE



CARD # XXXXXXXXXXXXX1757
Chip Card: VISA DEBIT
Chip Card AID: A0000000031110
ATC: 0010
TC: 364HD1F9C0155ECB
INVOICE 0032
SEQ #: 0030
Batch #: 000080
Approval Code: 001619
Entry Method: Chip Read
Mode: Issuer
SALE AMOUNT \$73.00

FOR
Alecia Draper
[REDACTED]

DATE	TERMS
2/26/2016	Due upon receipt

DESCRIPTION OF CHARGES	PERFORMED	QUANTITY	AMOUNT
Fecal - Ova & Parasites w/ Giardia (T808)	2/26/2016	1	35.00
Office Exam	2/26/2016	1	38.00

CUSTOMER COPY

Sales tax	0.00
PATIENT SUBTOTALS	
Monarch	\$73.00
INVOICE TOTAL	\$73.00
PAYMENT - CREDIT CARD	73.00
APPLIED TO INVOICE	73.00
CREDIT APPLIED TO ACCOUNT	0.00
CHANGE DUE	0.00
RUNNING BALANCE	\$0.00

Payments and Credits for #37816			
PMT INV	02/26/2016	Credit Card	-73.00

NOTES

REMINDERS

Monarch 2/26/2017 Fecal - Ova & Parasites w/ Giardia (T808)

APPOINTMENTS

RESP'T APP 2282

Thank you for the opportunity to serve you today.

ER 001050

BEACH CITY ANIMAL HOSP
7412 WARNER AVE
HUNTINGTON BE, CA 92647
03/03/2016 12:18:53

INVOICE



CREDIT CARD
MC SALE

CARD # XXXXXXXXXXXX0036
Chip Card: CAPITAL ONE
Chip Card AID: A0000000041010
ATC: 0007
TC: A91C217401D11468
INVOICE 0005
SEQ #: 0005
Batch #: 000085
Approval Code: 056292
Entry Method: Chip Read
Mode: Issuer

DATE	TERMS
3/3/2016	Due upon receipt

FOR
Alecia Draper


SALE AMOUNT

\$35.00

DESCRIPTION OF CHARGES	PERFORMED	QUANTITY	AMOUNT
Fecal - Ova & Parasites w/ Giardia (T808)	3/3/2016	1	35.00
Sales tax			0.00

CUSTOMER COPY

PATIENT SUBTOTALS	INVOICE TOTAL	\$35.00
Monarch	PAYMENT - CREDIT CARD	35.00
	APPLIED TO INVOICE	35.00
	CREDIT APPLIED TO ACCOUNT	0.00
	CHANGE DUE	0.00
	RUNNING BALANCE	\$0.00

Payments and Credits for #38004			
PMT INV	03/03/2016	Credit Card	-35.00

NOTES

REMINDERS

Monarch 3/3/2017 Fecal - Ova & Parasites w/ Giardia (T808)

APPOINTMENTS

RESP'T APP 2283

Thank you for the opportunity to serve you today.

ER 001051

EXHIBIT 66

EXHIBIT 66

EXHIBIT 66
RESP'T APP 2284

William R. Mason Regional**18712 University Drive Irvine CA 92612**

Transaction #: 1531
 Register #: 1
 Cashier #: 1216
 Batch #: 549
 Customer : REED, EMILY
 Date : 8/31/2018
 Time : 3:17 PM
 Transaction Type : Sales
 Confirmation Number : 344430

Description	Unit Price	Qty	Amount
OC Annual Passes - Reed, Emily - Membership: OC Annual Passes - Duration: 08/31/18 to 08/30/19	\$55.00	1.00	\$55.00
ID Card Replacement Fee - Replacement Fee for REED, EMILY	\$0.00	1.00	\$0.00
Sub Total :			\$55.00
TAX :			\$0.00
Grand Total :			\$55.00
Approval Code: 016119			
Visa XXXXXXXXXXXXXX3039 :			\$55.00

1531

**RESP'T APP 2285****ER 001052**

EXHIBIT 67

EXHIBIT 67

EXHIBIT 67
RESP'T APP 2286

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 4/16/18

Date of Next Appointment: Day _____

Time _____ AM PM

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	<u>\$250</u>
☒ 90834	Psychotherapy 45 min.	
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

Diagnosis and Concurrent Conditions

F43.10
F44.99

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____



Total Fee \$250
Total Received \$250
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature _____

Wells Fargo cc Alecia

RESP'T APP 2287

ER 001055

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	\$250
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Name: Emily Reed

Date of Service: 11/30/18

Date of Next Appointment: Day _____
Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10
F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____



Total Fee \$250
Total Received \$250
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature CCR

RESP'T APP 2288

ER 001056

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 11/24/18

Date of Next Appointment: Day _____
Time _____ AM PM

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>\$250</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

Diagnosis and Concurrent Conditions

F43.10

F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____



Total Fee \$250
Total Received \$250
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2289

ER 001057

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>\$250</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Total Fee \$250
Total Received \$250
Total Owed 0



☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Name: Emily Reed

Date of Service: 1/19/18

Date of Next Appointment: Day _____ Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10
F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured)

Date

Signature

RESP'T APP 2290

ER 001058

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	\$250
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Name: Emily Reed
Date of Service: 1/12/18
Date of Next Appointment: Day _____
Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10
F94.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.



Total Fee \$250
Total Received \$250
Total Owed 0

Signed (Insured)

Date

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature

RESP'T APP 2291

ER 001059

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☒ 90882	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	\$250
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Name: Emily Reed

Date of Service: 1/5/18

Date of Next Appointment: Day _____ Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10

F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____



Total Fee \$250
Total Received \$250
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2292

ER 001060

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	\$250
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Name: Emily Reed

Date of Service: 12/20/17

Date of Next Appointment: Day _____
Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10
F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____



Total Fee \$250
Total Received \$250
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2293

ER 001061

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>\$250</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Total Fee \$250
Total Received \$250
Total Owed 0



☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Name: Emily Reed

Date of Service: 11/20/17

Date of Next Appointment: Day _____
Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10
F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) [Signature] Date _____

RESP'T APP 2294

ER 001062

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 10/11/17

Date of Next Appointment: Day _____
Time _____ AM PM

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>2 (\$250)</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____	_____	

Diagnosis and Concurrent Conditions

F43.10
F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.



Total Fee \$500
Total Received \$500
Total Owed 0

Signed (Insured) _____ Date _____

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2295

ER 001063

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 10/4/17

Date of Next Appointment: Day _____
Time _____ AM PM

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>2 (\$250)</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

Diagnosis and Concurrent Conditions

F43.10

F44-89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.



Total Fee \$500
Total Received \$500
Total Owed 0

Signed (Insured) _____ Date _____

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2296

ER 001064

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	2 (\$250)
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Name: Emily Reed

Date of Service: 9/27/15

Date of Next Appointment: Day _____
Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10

F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____



Total Fee \$500
Total Received \$500
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2297

ER 001065

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 6/20/17

Date of Next Appointment: Day _____

Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10

F44.89

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>2 (\$250)</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

Total Fee \$500

Total Received \$500

Total Owed 0

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____

ASR



☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature _____

RESP'T APP 2298

ER 001066

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 6/13/17

Date of Next Appointment: Day _____ Time _____ AM PM

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	2 (\$250)
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Diagnosis and Concurrent Conditions

F43.10

F44.29

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.



Total Fee \$500
Total Received \$500
Total Owed 0

Signed (Insured) _____ Date _____

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2299

ER 001067

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 6/8/17

Date of Next Appointment: Day _____
Time _____ AM PM

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>2 (\$250)</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

Diagnosis and Concurrent Conditions

F43.10

F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.



Total Fee \$500
Total Received \$500
Total Owed 0

Signed (Insured) _____ Date _____

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature _____

[Signature]

RESP'T APP 2300

ER 001068

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	2 (\$250)
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Name: Emily Reed

Date of Service: 8/16/17

Date of Next Appointment: Day _____
Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10

F44-89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____



Total Fee \$500
Total Received \$500
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2301

ER 001069

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	2 (\$250)
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Name: Emily Reed

Date of Service: 8/9/17

Date of Next Appointment Day _____

Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10

F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured)

Date

Total Fee \$500
Total Received \$500
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature

[Signature]



RESP'T APP 2302

ER 001070

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 9/2/17

Date of Next Appointment: Day _____
Time _____ AM PM

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>2 (\$250)</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

Diagnosis and Concurrent Conditions

F43.10

F44.81

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.



Total Fee \$500
Total Received \$500
Total Owed 0

Signed (Insured)

Date

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature

RESP'T APP 2303

ER 001071

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 9/13/17

Date of Next Appointment: Day _____
Time _____ AM PM

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>2 (\$250)</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

Diagnosis and Concurrent Conditions

F43.10

F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.



Total Fee \$500
Total Received \$500
Total Owed 0

Signed (Insured) _____ Date _____

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2304

ER 001072

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 8/23/17

Date of Next Appointment: Day _____

Time _____ AM PM

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>2 (\$250)</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

Diagnosis and Concurrent Conditions

F43.10

F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.



Total Fee \$500
Total Received \$500
Total Owed 0

Signed (Insured)

Date

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature

[Signature]

RESP'T APP 2305

ER 001073

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	2 (\$250)
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

Name: Emily Reed

Date of Service: 9/6/17

Date of Next Appointment Day _____

Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10

\$44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____

Total Fee \$500
Total Received \$500
Total Owed 0



☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature _____

RESP'T APP 2306

ER 001074

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	2/(\$250)
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		



Total Fee \$500
Total Received \$500
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Name: Emily Reed

Date of Service: 7/18/17

Date of Next Appointment: Day _____
Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10
F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____

Signature C. Rouanzoin

RESP'T APP 2307

ER 001075

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 7/13/17

Date of Next Appointment: Day _____ Time _____ AM PM

Code	Product	Fee
☐ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	2 (\$250)
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐		

Diagnosis and Concurrent Conditions

F43.10

F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____

Total Fee \$500
Total Received \$500
Total Owed 0



Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2308

ER 001076

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Name: Emily Reed

Date of Service: 7/5/17

Date of Next Appointment: Day _____

Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10
F44.89

Code	Product	Fee
☒ 90832	Psychotherapy 30 min.	
☒ 90834	Psychotherapy 45 min.	<u>2 (\$250)</u>
☐ 90837	Psychotherapy 60 min.	
☐ 90847	Family Therapy with Patient Present	
☐ 99080	Special Reports	
☐ 96101	Psych Testing	
☐ 90791	Diagnostic Evaluation	
☐ _____		

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insurance) _____ Date _____

Total Fee \$500
Total Received \$500
Total Owed 0



☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature Curtis C. Rouanzoin

RESP'T APP 2309

ER 001077

Curtis C. Rouanzoin, Ph.D. and Associates, Inc.

16755 Von Karman Ave. • Suite 200 • Irvine, CA 92606 • Phone 949-242-4555

TIN: 260018479

NPI: 1972526382

CALIFORNIA STANDARD NOMENCLATURE

Place of Service: ☒ Irvine Office ☐ Home

Code	Product	Fee
90832	Psychotherapy 30 min.	
90834	Psychotherapy 45 min.	2 (#250)
90837	Psychotherapy 60 min.	
90847	Family Therapy with Patient Present	
99080	Special Reports	
96101	Psych Testing	
90791	Diagnostic Evaluation	

Name: Emily Reef

Date of Service: 6/27/15

Date of Next Appointment: Day _____ Time _____ AM PM

Diagnosis and Concurrent Conditions

F43.10
F44.89

I hereby authorize _____
to furnish information to insurance carriers concerning my
treatment should information be requested.

Signed (Insured) _____ Date _____



Total Fee \$500
Total Received \$500
Total Owed 0

☒ Curtis C. Rouanzoin, Ph.D.
Lic. No. PSY7809

Signature [Signature]

RESP'T APP 2310

ER 001078

EXHIBIT 68

EXHIBIT 68

EXHIBIT 68
RESP'T APP 2311

PLEASE MAKE CHECKS PAYABLE TO:

Customer Statement

Amen Clinics, Inc. OC

3150 Bristol St., Ste 400
Costa Mesa, CA 92626
949-266-3700

STATEMENT DATE	ACCOUNT NUMBER	AMOUNT DUE
6/17/2019		\$0.00

Federal Tax ID: [REDACTED]

Patient: Emily Reed

DOB: [REDACTED]

Diagnosis: F43.12 Post-traumatic stress disorder, chronic
F44.81 Dissociative identity disorder
F33.2 Major depressive disorder, recurrent s...

RESPONSIBLE PARTY:

Emily Reed

Date	CPT	Description	Rend. Provider	Units	Charges	Payments
3/2/2016		2.0 New Patient Eval Deposit (#109573)				500.00
3/23/2016		2.1 New Patient Evaluation (#115589)				3,050.00
3/23/2016	78607	Brain Imaging, Tomographic (SPECT)	Scan Orange County Calendar NPI: 1568865301	1	800.00	
3/23/2016	96146	Psychological Testing - Eval	Scan Orange County Calendar NPI: 1568865301	1	150.00	
3/23/2016	99205	Initial Comprehensive and Management		1	300.00	
3/23/2016	90889	Preparation of Initial Report-HX		1	100.00	
3/24/2016	78607	Brain Imaging, Tomographic (SPECT)	Scan Orange County Calendar NPI: 1568865301	1	1,200.00	
3/25/2016	90887	Interpretation or Explanation of Results	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	175.00	
3/25/2016	90889	Preparation of Initial Report	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	75.00	
3/25/2016	90885	Psychiatric Eval. of records/reports, tests	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	75.00	
3/25/2016	90792	Psych. Diagnostic Interview	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	375.00	
3/25/2016	96130	Psychological Testing	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/1/2016	99214	Office Visit - Follow Up Appointment	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/1/2016	90833	Therapy- Follow Up Appointment	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/29/2016		1. Other Services (#125539)				200.00
4/29/2016	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	

RESP'T APP 2312

ER 001187

Date	CPT	Description	Rend. Provider	Units	Charges	Payments
4/29/2016	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
5/27/2016		1. Other Services (#133573)				200.00
5/27/2016	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
5/27/2016	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
6/2/2016		1. Other Services (#134865)				300.00
6/2/2016	99080	Letter Writing Fee - 30 min	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	200.00	
6/2/2016	99080	Letter Writing Fee - 15 min	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
6/24/2016		1. Other Services (#141559)				200.00
6/24/2016	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
6/24/2016	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
7/22/2016		1. Other Services (#149905)				200.00
7/22/2016	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
7/22/2016	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
8/23/2016		1. Other Services (#159387)				200.00
8/23/2016	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
8/23/2016	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
9/22/2016		1. Other Services (#168297)				200.00
9/22/2016	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
9/22/2016	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
11/15/2016		1. Other Services (#183383)				200.00
11/15/2016	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
11/15/2016	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
12/16/2016		1. Other Services (#192907)				200.00
12/16/2016	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
12/16/2016	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
1/23/2017		1. Other Services (#203815)				200.00
1/23/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	

RESPIR APP 2313

ER 001188

Date	CPT	Description	Rend. Provider	Units	Charges	Payments
1/23/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
3/24/2017		1. Other Services (#223051)				200.00
3/24/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
3/24/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/14/2017		1. Other Services (#229611)				200.00
4/14/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/14/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/27/2017		1. Other Services (#233457)				200.00
4/27/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/27/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
5/9/2017		1. Other Services (#236801)				200.00
5/9/2017	99080	Letter Writing Fee - 30 min	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	200.00	
5/12/2017		1. Other Services (#238117)				200.00
5/12/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
5/12/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
5/26/2017		1. Other Services (#242425)				200.00
5/26/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
5/26/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
6/9/2017		1. Other Services (#246537)				200.00
6/9/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
6/9/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
7/7/2017		1. Other Services (#254371)				200.00
7/7/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
7/7/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
7/12/2017		1. Other Services (#255835)				600.00
7/12/2017	Review of Records - 60 MIN		Jennifer Love-Farrell, M.D. NPI: 1558577403	1	400.00	

RESP'T APP 2314

ER 001189

Date	CPT	Description	Render. Provider	Units	Charges	Payments
7/12/2017	Review of Records - 30 MIN		Jennifer Love-Farrell, M.D. NPI: 1558577403	1	200.00	
7/13/2017		1. Other Services (#256113)				600.00
7/13/2017	99080	Letter Writing Fee - 60 min	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	400.00	
7/13/2017	99080	Letter Writing Fee - 30 min	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	200.00	
8/4/2017		1. Other Services (#262941)				200.00
8/4/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
8/4/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
8/25/2017		1. Other Services (#269521)				200.00
8/25/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
8/25/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
9/22/2017		1. Other Services (#277979)				200.00
9/22/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
9/22/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
11/20/2017		1. Other Services (#297667)				200.00
11/20/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
11/20/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
12/21/2017		1. Other Services (#308707)				200.00
12/21/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
12/21/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
12/27/2017		1. Other Services (#310135)				200.00
12/27/2017	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
12/27/2017	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
1/3/2018		1. Other Services (#311809)				200.00
1/3/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
1/3/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
1/24/2018		1. Other Services (#319017)				200.00
1/24/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	

RESP'T APP 2315

ER 001190

Date	CPT	Description	Render. Provider	Units	Charges	Payments
1/24/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
1/29/2018		1. Other Services (#320597)				200.00
1/29/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
1/29/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
2/20/2018		1. Other Services (#328323)				200.00
2/20/2018	No Show - Doctor Appointment		Jennifer Love-Farrell, M.D. NPI: 1558577403		200.00	
3/21/2018		REFUND: 1. Other Services (#339001)				(200.00)
3/22/2018	WriteOff -	appt 2/20/18	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	(200.00)	
4/20/2018		1. Other Services (#349725)				200.00
4/20/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/20/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
6/4/2018		1. Other Services (#364153)				200.00
6/4/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
6/4/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
7/2/2018		1. Other Services (#374081)				200.00
7/2/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
7/2/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
7/31/2018		1. Other Services (#383581)				200.00
7/31/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
7/31/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
8/27/2018		1. Other Services (#394349)				200.00
8/27/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
8/27/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
10/2/2018		1. Other Services (#406945)				200.00
10/2/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
10/2/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
11/6/2018		1. Other Services (#419507)				200.00

RESP T APP 2316

ER 001191

Date	CPT	Description	Render. Provider	Units	Charges	Payments
11/6/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
11/6/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
12/6/2018		1. Other Services (#430525)				200.00
12/6/2018	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
12/6/2018	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
1/14/2019		1. Other Services (#443863)				200.00
1/14/2019	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
1/14/2019	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
2/18/2019		1. Other Services (#457393)				200.00
2/18/2019	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
2/18/2019	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
3/20/2019		1. Other Services (#469771)				200.00
3/20/2019	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
3/20/2019	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/23/2019		1. Other Services (#482463)				200.00
4/23/2019	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
4/23/2019	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
5/22/2019		1. Other Services (#494271)				200.00
5/22/2019	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
5/22/2019	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
6/17/2019		1. Other Services (#503879)				200.00
6/17/2019	90833	Therapy	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	
6/17/2019	99214	Office Visit	Jennifer Love-Farrell, M.D. NPI: 1558577403	1	100.00	

Total: \$13,050.00 \$13,050.00

Balance Due: \$0.00

RESP'T APP 2317

ER 001192

EXHIBIT 69

EXHIBIT 69

EXHIBIT 69
RESP'T APP 2318

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 11449

Date	Jun 12, 2019
Terms	
Service Thru	Jun 12, 2019

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
05/28/2019	Rhoneil A Pascual	Review: Continued reviewing case file.	0.30	\$ 0.00/hr	\$ 0.00
05/28/2019	Rhoneil A Pascual	Review: Reviewed probate notes regarding deficiency of filings.	0.40	\$ 0.00/hr	\$ 0.00
05/28/2019	Rhoneil A Pascual	Correspondence: Informed Alecia of her upcoming hearing.	0.10	\$ 350.00/hr	\$ 35.00
05/28/2019	Jennel Calica	Other: Looked for documents Trang filed on One Legal and sent to Rhon	0.10	\$ 275.00/hr	\$ 27.50
05/28/2019	Rhoneil A Pascual	Review: Reviewed previously filed documents.	0.10	\$ 0.00/hr	\$ 0.00
05/28/2019	Rhoneil A Pascual	Review: Reviewed notice of filing of inventory and appraisalment.	0.20	\$ 0.00/hr	\$ 0.00
05/29/2019	Jennel Calica	Phone Call: Phone call with client re credit card number	0.10	\$ 275.00/hr	\$ 27.50
05/29/2019	Rhoneil A Pascual	Draft: Revised notices in accordance with updated filings.	0.20	\$ 0.00/hr	\$ 0.00
05/29/2019	Jennel Calica	Phone Call: Scheduled a court call for client for hearing on 6/4 at 1:30p.m	0.30	\$ 275.00/hr	\$ 82.50
05/29/2019	Jennel Calica	Phone Call: Phone call with client to confirm price of court call	0.10	\$ 275.00/hr	\$ 27.50

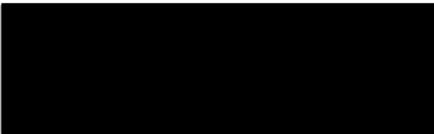
RESP'T APP 2319

ER 001193

Law Offices of Elizabeth Yang
 199 West Garvey Ave
 Suite 201
 Monterey Park, CA 91754



Alecia Draper



Invoice 11449

Date	Jun 12, 2019
Terms	
Service Thru	Jun 12, 2019

05/29/2019	Jennel Calica	Phone Call: Confirmed clients court call with CourtCall	0.20	\$ 275.00/hr	\$ 55.00
05/29/2019	Rhoneil A Pascual	Review: Reviewed case file and previously filed documents.	0.70	\$ 0.00/hr	\$ 0.00
05/29/2019	Jennel Calica	Other: Amended GC-042(MA) form; Conferred with Rhon re case	0.60	\$ 275.00/hr	\$ 165.00
05/29/2019	Rhoneil A Pascual	Correspondence: Sent update regarding upcoming hearing.	0.10	\$ 350.00/hr	\$ 35.00
05/30/2019	Jennel Calica	Other: Conferred with Rhon re case; Prepared mailing envelopes	0.60	\$ 275.00/hr	\$ 165.00
05/30/2019	Jennel Calica	Other: Emailed client court call confirmation	0.10	\$ 275.00/hr	\$ 27.50
05/30/2019	Rhoneil A Pascual	Documentation: Compiled notices to be mailed and filed.	0.40	\$ 0.00/hr	\$ 0.00
05/30/2019	Clara Yeung	Review: Reviewed file.	0.50	\$ 350.00/hr	\$ 175.00
05/30/2019	Jennel Calica	Other: E-filed clients Notice documents	0.20	\$ 275.00/hr	\$ 55.00
05/30/2019	Rhoneil A Pascual	Review: Conferred with Attorney Yeung regarding appearance for June 4. Went over probate notes and last minute order.	0.50	\$ 0.00/hr	\$ 0.00
05/30/2019	Clara Yeung	Phone Call: Phone call with Ron re internal discussion on upcoming hearing	0.40	\$ 350.00/hr	\$ 140.00
05/31/2019	Jennel Calica	Other: Sent Rhon conformed copies of Notice of conservatee's rights and notice of filing of inventory and appraisalment	0.10	\$ 275.00/hr	\$ 27.50

RESP'T APP 2320

ER 001194

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 11449

Date	Jun 12, 2019
Terms	
Service Thru	Jun 12, 2019

06/03/2019	Rhoneil A Pascual	Review: Prepared for June 4 hearing. Reviewed probate notes and probate case.	0.20	\$ 350.00/hr	\$ 70.00
06/03/2019	Rhoneil A Pascual	Review: Reviewed case file.	0.10	\$ 0.00/hr	\$ 0.00
06/04/2019	Rhoneil A Pascual	Correspondence: Sent email reminder of today's hearing.	0.10	\$ 350.00/hr	\$ 35.00
06/04/2019	Jennel Calica	Other: Conferred with Rhon e-file of POS; E-filed clients POS of Notice of Conservatee's Rights	0.40	\$ 275.00/hr	\$ 110.00
06/04/2019	Rhoneil A Pascual	Review: Prepared case file for hearing to address probate note issues.	0.50	\$ 0.00/hr	\$ 0.00
06/04/2019	Jennel Calica	Other: Assisted Rhon with forms to bring to the hearing; Conferred with Rhon re case	0.20	\$ 275.00/hr	\$ 55.00
06/04/2019	Rhoneil A Pascual	Court Time: Attended hearing. Reported to the court that, per the probate notes, the deficiencies have now been corrected. Court set review hearing.	3.20	\$ 350.00/hr	\$ 1,120.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
06/04/2019	Rhoneil A Pascual	Parking: Parking for review hearing.	\$ 7.00

Total Hours 11.00 hrs

Total Hours \$ 2,435.00

Total Expenses \$ 7.00

RESP'T APP 2321

ER 001195

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 11449

Date	Jun 12, 2019
Terms	
Service Thru	Jun 12, 2019

Total Invoice Amount	\$ 2,442.00
Previous Balance	\$ 1,684.00
Balance (Amount Due)	\$ 2,442.00

Payment History:

Date	Type	Payment Description	Amount
04/05/2019	Payment - Credit Card		(\$1,684.00)

RESP'T APP 2322

ER 001196

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 11063

Date	Apr 04, 2019
Terms	
Service Thru	Apr 04, 2019

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
02/25/2019	Derrick Uhri	Review: Review Posted Probate Notes	0.20	\$ 350.00/hr	\$ 70.00
03/07/2019	Derrick Uhri	Draft: Drafted GC-042 and revised Forms per Probate Notes	1.60	\$ 350.00/hr	\$ 560.00
03/21/2019	Derrick Uhri	Documentation: Filed Court Requested Forms	0.30	\$ 350.00/hr	\$ 105.00
03/21/2019	Derrick Uhri	Documentation: Created Mailers	0.40	\$ 350.00/hr	\$ 140.00
03/25/2019	Derrick Uhri	Correspondence: Email RE: Receipt for Filings	0.10	\$ 350.00/hr	\$ 35.00
03/26/2019	Derrick Uhri	Court Time: Review Hearing	2.20	\$ 350.00/hr	\$ 770.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
03/26/2019	Derrick Uhri	Parking: Parking at Santa Ana Courthouse	\$ 4.00

Total Hours 4.80 hrs

Total Hours \$ 1,680.00

Total Expenses \$ 4.00

Total Invoice Amount \$ 1,684.00

Previous Balance \$ 0.00

Balance (Amount Due) \$ 1,684.00

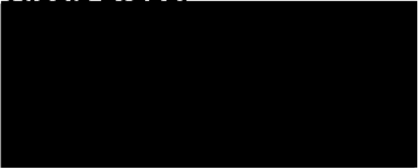
RESP'T APP 2323

ER 001197

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper



Invoice 11063

Date	Apr 04, 2019
Terms	
Service Thru	Apr 04, 2019

RESP'T APP 2324

ER 001198

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10970

Date	Feb 13, 2019
Terms	N/A
Service Thru	Feb 13, 2019

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
01/10/2019	Lauren Sorsby	Correspondence: email to client re: hearing confirmation and status	0.10	\$ 350.00/hr	\$ 35.00
01/10/2019	Lauren Sorsby	Review: File Review	0.50	\$ 350.00/hr	\$ 175.00
01/15/2019	Lauren Sorsby	Court Time: Hearing: Status	2.50	\$ 350.00/hr	\$ 875.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
01/16/2019	Lauren Sorsby	Parking: Parking	\$ 10.00

Total Hours 3.10 hrs

Total Hours \$ 1,085.00

Total Expenses \$ 10.00

Total Invoice Amount \$ 1,095.00

Previous Balance \$ 1,463.63

Balance (Amount Due) \$ 0.00

Payment History:

Date	Type	Payment Description	Amount
12/18/2018	Payment - Credit Card		(\$1,463.63)
02/11/2019	Payment - Credit Card		(\$1,095.00)

RESP'T APP 2325

ER 001199

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10840

Date	Dec 03, 2018
Terms	
Service Thru	Dec 03, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
11/15/2018	Derrick Uhri	Phone Call: Call with Client RE: Who needs to be at the Hearing	0.10	\$ 350.00/hr	\$ 35.00
11/26/2018	Derrick Uhri	Draft: Drafted forms for Conservator Hearing	0.70	\$ 350.00/hr	\$ 245.00
11/26/2018	Derrick Uhri	Phone Call: Left VM for Client RE: Further Information Needed	0.10	\$ 350.00/hr	\$ 35.00
11/27/2018	Derrick Uhri	Correspondence: Email to Client RE: Further Information Needed	0.10	\$ 350.00/hr	\$ 35.00
11/27/2018	Derrick Uhri	Draft: Drafted Forms for Conservator Hearing	1.30	\$ 350.00/hr	\$ 455.00
11/27/2018	Derrick Uhri	Court Time: Followup Hearing for Conservatorship	1.50	\$ 350.00/hr	\$ 525.00
11/30/2018	Derrick Uhri	Draft: Drafted Forms for Hearing	0.30	\$ 350.00/hr	\$ 105.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
11/28/2018	Derrick Uhri	Parking: Parking at Santa Ana Courthouse	\$ 3.00
11/30/2018	Derrick Uhri	Mailing/Postage: 22 Stamps -\$10.78 99 Pages -\$14.85	\$ 25.63

Total Hours 4.10 hrs

Total Hours \$ 1,435.00

Total Expenses \$ 28.63

RESP'T APP 2326

ER 001200

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10840

Date	Dec 03, 2018
Terms	
Service Thru	Dec 03, 2018

Total Invoice Amount	\$ 1,463.63
Previous Balance	\$ 0.00
Balance (Amount Due)	\$ 1,463.63

RESP'T APP 2327

ER 001201

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10678

Date	Oct 02, 2018
Terms	
Service Thru	Oct 02, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
09/13/2018	Trang Nguyen	Other: Call clerk and contact probate examiner re rejection of letter of conservatorship	0.20	\$ 100.00/hr	\$ 20.00
09/18/2018	Trang Nguyen	Other: Correspondence with clerk re rejection letter of conservatorship; review Probate Code 2355 and 2356 regarding medical power and convulsive treatment; draft attachment to letter of conservatorship re same; prepare documents and mailing to re-file with court	1.00	\$ 100.00/hr	\$ 100.00

Total Hours 1.20 hrs

Total Hours \$ 120.00

Total Invoice Amount \$ 120.00

Previous Balance \$ 602.28

Balance (Amount Due) \$ 0.00

Payment History:

Date	Type	Payment Description	Amount
10/02/2018	Payment - Credit Card	Payment to Invoice #10678	(\$722.28)

RESP'T APP 2328

ER 001202

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10516

Date	Aug 31, 2018
Terms	
Service Thru	Aug 31, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
08/06/2018	Natalie Schneider	Correspondence: Emailed client Alecia Draper re status of case.	0.20	\$ 250.00/hr	\$ 50.00
08/13/2018	Natalie Schneider	Research: Reviewed notice from Court and researched probate code.	0.20	\$ 250.00/hr	\$ 50.00
08/13/2018	Natalie Schneider	Draft: Reviewed Court's correspondence and revised proposed order accordingly and met and conferred with paralegal Trang Nguyen re same.	0.60	\$ 250.00/hr	\$ 150.00
08/13/2018	Trang Nguyen	Other: Revised and e-filed GC 340 Order appointing Probate Conservator per request of attorney Natalie Schneider	0.50	\$ 100.00/hr	\$ 50.00
08/13/2018	Natalie Schneider	Review: Reviewed and organized revised proposed order and emailed client Alecia Draper re same.	0.20	\$ 250.00/hr	\$ 50.00
08/28/2018	Elizabeth Yang	Review: Review conformed copy of proposed order and send to client	0.20	\$ 350.00/hr	\$ 70.00
08/28/2018	Elizabeth Yang	Correspondence: Correspond with client re minutes, bond, upcoming court dates, and mediation	0.30	\$ 350.00/hr	\$ 105.00
08/29/2018	Elizabeth Yang	Correspondence: Correspond with courier re certified documents and letters	0.10	\$ 350.00/hr	\$ 35.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
08/13/2018	Natalie Schneider	Printing/Copying: Printed Notice of Electronic Filing	\$ 0.15
08/13/2018	Natalie Schneider	Printing/Copying: Printed Proposed Order	\$ 0.30

RESP'T APP 2329

ER 001203

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10516

Date	Aug 31, 2018
Terms	
Service Thru	Aug 31, 2018

Total Hours	2.30 hrs
Total Hours	\$ 560.00
Total Expenses	\$ 0.45
Total Invoice Amount	\$ 560.45
Previous Balance	\$ 2,601.83
Balance (Amount Due)	\$ 602.28

Payment History:

Date	Type	Payment Description	Amount
08/06/2018	Payment - Credit Card	Payment towards balance.	(\$2,560.00)

RESP'T APP 2330

ER 001204

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10439

Date	Jul 31, 2018
Terms	
Service Thru	Jul 31, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
07/05/2018	Natalie Schneider	Correspondence: Emailed client Alecia Draper re conservatorship orientation class.	0.10	\$ 250.00/hr	\$ 25.00
07/06/2018	Natalie Schneider	Correspondence: Emailed client Alecia Draper re Proof of Completion of orientation program and capacity declaration.	0.20	\$ 250.00/hr	\$ 50.00
07/06/2018	Natalie Schneider	Review: Reviewed case file, conferred with Dr. Farrell's office, and included date to Capacity Declaration.	0.50	\$ 250.00/hr	\$ 125.00
07/11/2018	Natalie Schneider	Research: Researched California Probate Code re incapacity to make medical decisions.	0.20	\$ 250.00/hr	\$ 50.00
07/11/2018	Natalie Schneider	Draft: Drafted Verified Supplement to Petition for Conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
07/12/2018	Natalie Schneider	Draft: Drafted Verified Supplement.	0.50	\$ 250.00/hr	\$ 125.00
07/12/2018	Natalie Schneider	Draft: Drafted verified supplement to petition for conservatorship.	0.90	\$ 250.00/hr	\$ 225.00
07/12/2018	Natalie Schneider	Correspondence: Emailed and called client Alecia Draper re verified supplement.	0.50	\$ 250.00/hr	\$ 125.00
07/12/2018	Natalie Schneider	Correspondence: Emailed client Alecia Draper re verified supplement and letters.	0.10	\$ 250.00/hr	\$ 25.00
07/12/2018	Natalie Schneider	Correspondence: Called and emailed Public Defender re upcoming hearing on conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
07/13/2018	Natalie Schneider	Phone Call: Conferred with client Alecia Draper re verified supplement to Petition.	0.10	\$ 250.00/hr	\$ 25.00

RESP'T APP 2331

ER 001205

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10439

Date	Jul 31, 2018
Terms	
Service Thru	Jul 31, 2018

07/13/2018	Natalie Schneider	Correspondence: Emailed paralegal Trang Nguyen re service of verified supplement and e-filing of related documents.	0.50	\$ 250.00/hr	\$ 125.00
07/13/2018	Trang Nguyen	Other: Prepare Proof of service re serving Relatives and Public Defender; Organize documents, prepare documents for mailing and serving Relative and Public Defender; E-filed and Served Proof of Service and Supplement documents	2.60	\$ 100.00/hr	\$ 260.00
07/19/2018	Natalie Schneider	Correspondence: Reviewed investigator's addendum and emailed client Alecia Draper re same.	0.30	\$ 250.00/hr	\$ 75.00
07/19/2018	Trang Nguyen	Other: Reviewed case file, printed, organized and prepared documents for hearing	0.80	\$ 100.00/hr	\$ 80.00
07/23/2018	Natalie Schneider	Phone Call: Conferred with client Alecia Draper re hearing on conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
07/23/2018	Trang Nguyen	Other: Review and download probate note re hearing on July 24 for attorney Natalie Schneider	0.10	\$ 100.00/hr	\$ 10.00
07/23/2018	Natalie Schneider	Review: Reviewed probate notes and organized same in client's case file.	0.10	\$ 250.00/hr	\$ 25.00
07/24/2018	Natalie Schneider	Review: Reviewed and analyzed case file in preparation for hearing on general conservatorship.	0.50	\$ 250.00/hr	\$ 125.00
07/24/2018	Natalie Schneider	Court Time: Attended hearing on petition for general conservatorship to further client Alecia Draper's cause.	2.00	\$ 250.00/hr	\$ 500.00
07/24/2018	Natalie Schneider	Research: Researched Probate Code and drafted proposed order to be filed with the Court.	0.50	\$ 250.00/hr	\$ 125.00
07/24/2018	Natalie Schneider	Court Time: Filed Letters at filing window to be issued.	0.40	\$ 250.00/hr	\$ 100.00
07/24/2018	Natalie Schneider	Correspondence: Emailed attorney Elizabeth Yang and paralegal Trang Nguyen re outcome of hearing on petition for general conservatorship.	0.30	\$ 250.00/hr	\$ 75.00

RESP'T APP 2332

ER 001206

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10439

Date	Jul 31, 2018
Terms	
Service Thru	Jul 31, 2018

07/24/2018	Trang Nguyen	Other: Revised GC 340 Proposed Order appointing Probate Conservator and e-file document	0.60	\$ 100.00/hr	\$ 60.00
07/24/2018	Natalie Schneider	Correspondence: Emailed paralegal Trang Nguyen re the proposed order.	0.10	\$ 250.00/hr	\$ 25.00
07/24/2018	Natalie Schneider	Correspondence: Reviewed and organized proposed order, letters, and power of attorney in client's case file.	0.10	\$ 250.00/hr	\$ 25.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
07/13/2018	Trang Nguyen	Mailing/Postage: Serving relatives and public defenders Verified Supplement to Petition for Conservatorship and Amended Capacity Declaration with date of physician's signature	\$ 10.33
07/13/2018	Trang Nguyen	Printing/Copying: Printed 9 copies of Verified Supplement to Petition for Conservatorship	\$ 6.75
07/13/2018	Trang Nguyen	Printing/Copying: Printed 9 copies of Proof of service for relatives re Verified Supplement to Petition for Conservatorship	\$ 2.70
07/13/2018	Trang Nguyen	Printing/Copying: Printed 1 copy of Amended Capacity Declaration with date of physician's signature	\$ 0.45
07/13/2018	Trang Nguyen	Printing/Copying: Printed 1 copy of proof of service for Public defender	\$ 0.30
07/13/2018	Trang Nguyen	Printing/Copying: Printed 1 copy of Notice of Conservatorship	\$ 0.45
07/13/2018	Trang Nguyen	Printing/Copying: Printed 1 copy of Notice of Conservatorship	\$ 1.20
07/13/2018	Trang Nguyen	Printing/Copying: Printed 1 copy of Conformed Declaration of Alecia Draper	\$ 0.90

RESP'T APP 2333

ER 001207

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10439

Date	Jul 31, 2018
Terms	
Service Thru	Jul 31, 2018

07/13/2018	Trang Nguyen	Printing/Copying: Printed 1 copy of Conformed Citation with Proof of Service	\$ 0.45
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy GC 020	\$ 0.45
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy GC 335	\$ 0.45
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy Amended GC 310	\$ 1.20
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy Conformed Declaration of Alecia Draper	\$ 0.90
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy Conformed GC 348	\$ 1.05
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy Conformed GC 320	\$ 0.60
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy Conformed Verified Supplement to Petition	\$ 0.75
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy Conformed Proof of Service to the relatives	\$ 0.60
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy Investigator's Report	\$ 2.10
07/19/2018	Trang Nguyen	Printing/Copying: Printed 1 copy of Addendum	\$ 0.60
07/24/2018	Natalie Schneider	Printing/Copying: Printed Proposed Order	\$ 0.45
07/24/2018	Natalie Schneider	Printing/Copying: Printed Proof of Completion	\$ 0.15
07/24/2018	Natalie Schneider	Parking: Central Justice Center parking	\$ 9.00

RESP'T APP 2334

ER 001208

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10439

Date	Jul 31, 2018
Terms	
Service Thru	Jul 31, 2018

Total Hours	12.70 hrs
Total Hours	\$ 2,560.00
Total Expenses	\$ 41.83
Total Invoice Amount	\$ 2,601.83
Previous Balance	\$ 1,025.45
Balance (Amount Due)	\$ 2,601.83

Payment History:

Date	Type	Payment Description	Amount
07/03/2018	Payment - Credit Card		(\$1,025.45)

RESP'T APP 2335

ER 001209

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10399

Date	Jul 02, 2018
Terms	
Service Thru	Jul 02, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
06/01/2018	Trang Nguyen	Phone Call: Called clerk to determine hearing date of conservatorship	0.40	\$ 100.00/hr	\$ 40.00
06/06/2018	Trang Nguyen	Other: Called clerk and email probate note to inquire status of hearing for Limited Conservatorship appearance	0.30	\$ 100.00/hr	\$ 30.00
06/25/2018	Natalie Schneider	Review: Reviewed and analyzed investigator's report and emailed client Alecia Draper re same.	0.50	\$ 250.00/hr	\$ 125.00
06/25/2018	Natalie Schneider	Phone Call: Reviewed probate notes and conferred with client Alecia Draper re same.	0.60	\$ 250.00/hr	\$ 150.00
06/25/2018	Natalie Schneider	Correspondence: Emailed client Alecia Draper re conservatorship orientation program.	0.30	\$ 250.00/hr	\$ 75.00
06/26/2018	Natalie Schneider	Court Time: Attended hearing on limited conservatorship to further client Alecia Draper's cause.	1.30	\$ 250.00/hr	\$ 325.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
06/25/2018	Natalie Schneider	Printing/Copying: Printed probate notes	\$ 0.45
06/26/2018	Natalie Schneider	Parking: Central Justice Center parking	\$ 5.00

Total Hours 3.40 hrs

Total Hours \$ 745.00

Total Expenses \$ 5.45

RESP'T APP 2336

ER 001210

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10399

Date	Jul 02, 2018
Terms	
Service Thru	Jul 02, 2018

Total Invoice Amount	\$ 750.45
Previous Balance	\$ 275.00
Balance (Amount Due)	\$ 1,025.45

RESP'T APP 2337

ER 001211

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10321

Date	May 31, 2018
Terms	
Service Thru	May 31, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
05/25/2018	Natalie Schneider	Review: Reviewed and analyzed Court's order and decision re Defendant Jeffrey Reed's Motion for Summary Judgment and emailed client Alecia Draper re same.	0.90	\$ 250.00/hr	\$ 225.00
05/30/2018	Natalie Schneider	Correspondence: Reviewed and responded to client Alecia Draper's email re conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
05/31/2018	Natalie Schneider	Correspondence: Reviewed email correspondence of client Alecia Draper re status of proposed conservatee, Emily Reed.	0.10	\$ 250.00/hr	\$ 25.00
Total Hours					1.10 hrs
Total Hours					\$ 275.00
Total Invoice Amount					\$ 275.00
Previous Balance					\$ 115.00
Balance (Amount Due)					\$ 275.00

Payment History:

Date	Type	Payment Description	Amount
05/08/2018	Payment - Credit Card		(\$115.00)

RESP'T APP 2338

ER 001212

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10287

Date	Apr 30, 2018
Terms	
Service Thru	Apr 30, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
04/06/2018	NS	Correspondence: Reviewed and emailed Proof of Service to client Alecia Draper and conferred with paralegal Tang Nguyen re same.	0.20	\$ 250.00/hr	\$ 50.00
04/06/2018	TN	Other: E-filed Proof of Service re Citation for Conservatorship and Amended Petition to Central Justice Center	0.40	\$ 100.00/hr	\$ 40.00
04/06/2018	NS	Review: Reviewed and organized conformed Proof of Service and emailed client Alecia Draper re upcoming hearing on conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
Total Hours					0.70 hrs
Total Hours					\$ 115.00
Total Invoice Amount					\$ 115.00
Previous Balance					\$ 1,248.07
Balance (Amount Due)					\$ 115.00

Payment History:

Date	Type	Payment Description	Amount
04/05/2018	Payment - Credit Card		(\$1,248.07)

RESP'T APP 2339

ER 001213

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10231

Date	Apr 02, 2018
Terms	
Service Thru	Apr 02, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
03/01/2018	TN	Phone Call: called clerk to confirm hearings coming up in June and July for Amended Petition to General Conservatorship	0.20	\$ 100.00/hr	\$ 20.00
03/02/2018	NS	Correspondence: Emailed client Alecia Draper re hearing for general conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
03/06/2018	TN	Review: Revised, prepared and organized GC 320 Notice of Hearing, Amended Petition and Declaration of Alecia Draper in support of Conservatorship; prepared Proof of Service and mailed out documents to Jeffrey Reed and 2nd degree relatives	2.40	\$ 100.00/hr	\$ 240.00
03/06/2018	NS	Research: Researched service of Petition for Conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
03/06/2018	NS	Correspondence: Reviewed email correspondence from paralegal Trang Nguyen re serving relatives with Petition for Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
03/07/2018	NS	Draft: Drafted and reviewed GC-348 Duties of Conservator.	0.50	\$ 250.00/hr	\$ 125.00
03/07/2018	NS	Draft: Reviewed and drafted GC-320 Citation for Conservatorship.	0.40	\$ 250.00/hr	\$ 100.00
03/07/2018	NS	Correspondence: Researched orientation class re general conservatorships and emailed client Alecia Draper re GC-348 Duties of Conservator and GC-320 Citation for Conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
03/08/2018	NS	Correspondence: Emailed client Alecia Draper re service on proposed conservatee.	0.10	\$ 250.00/hr	\$ 25.00
03/08/2018	NS	Draft: Drafted GC-340 Proposed Order Appointing Conservator.	0.30	\$ 250.00/hr	\$ 75.00

RESP'T APP 2340

ER 001214

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10231

Date	Apr 02, 2018
Terms	
Service Thru	Apr 02, 2018

03/08/2018	NS	Draft: Drafted GC-350 Letters of Conservatorship and emailed client Alecia Draper re same.	0.30	\$ 250.00/hr	\$ 75.00
03/09/2018	NS	Correspondence: Emailed client Alecia Draper re conservatorship forms.	0.10	\$ 250.00/hr	\$ 25.00
03/15/2018	NS	Review: Reviewed and organized Letters of Conservatorship and Duties of Conservator in client's case file.	0.10	\$ 250.00/hr	\$ 25.00
03/16/2018	NS	Correspondence: Emailed paralegal Trang Nguyen re e-filing conservatorship paperwork.	0.20	\$ 250.00/hr	\$ 50.00
03/16/2018	TN	Other: Revised and e-filed documents including: Duties of Conservatorship, Letter of Conservatorship, Citation for Conservatorship, Proposed Order Appointing Probate Conservator, Notice of Hearing	0.80	\$ 100.00/hr	\$ 80.00
03/22/2018	TN	Other: Re-filed GC-320 Citation for Conservatorship with Central Justice Center court	0.30	\$ 100.00/hr	\$ 30.00
03/22/2018	NS	Review: Reviewed and organized filed conservatorship forms in client's case file.	0.10	\$ 250.00/hr	\$ 25.00
03/26/2018	NS	Review: Reviewed email from client Alecia Draper re pretrial conference and petition for conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
03/28/2018	TN	Other: Place order to personally serve Emily Reed with Petition, Declaration and Citation	0.40	\$ 100.00/hr	\$ 40.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
03/06/2018	TN	Mailing/Postage: Printed 9 copies GC 320 Notice of Hearing	\$ 4.05
03/06/2018	TN	Mailing/Postage: Printed 9 copies Amended Petition of Conservatorship of Person and Estate	\$ 10.80

RESP'T APP 2341

ER 001215

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10231

Date	Apr 02, 2018
Terms	
Service Thru	Apr 02, 2018

03/06/2018	TN	Mailing/Postage: Printed 9 copies Declaration of Alecia Draper in support of Conservatorship	\$ 8.10
03/06/2018	TN	Mailing/Postage: First class mailing to serve Amended Petition and Notice of Hearing to all 2nd degree relatives	\$ 14.67
03/22/2018	TN	Printing/Copying: Printed 1 copy of GC-320 Citation for Conservatorship	\$ 0.45

Total Hours	7.30 hrs
Total Hours	\$ 1,210.00
Total Expenses	\$ 38.07
Total Invoice Amount	\$ 1,248.07
Previous Balance	\$ 825.75
Balance (Amount Due)	\$ 1,248.07

Payment History:

Date	Type	Payment Description	Amount
03/02/2018	Payment - Credit Card		(\$825.75)

RESP'T APP 2342

ER 001216



Law Offices of Elizabeth Yang
 199 West Garvey Ave
 Suite 201
 Monterey Park, CA 91754

Statement submitted to:

Alecia Draper

Date of Statement: **Friday, March 2, 2018**
 Combined Account Statement

<u>Date</u>	<u>Item</u>	<u>Description</u>	<u>Credit Amount</u>	<u>Debit Amount</u>	<u>Balance</u>
02/09/2018	Payment - Credit Card		\$2,572.72		(\$2,572.72)
02/13/2018	Payment - Credit Card		\$3,500.00		(\$6,072.72)
02/14/2018	Invoice #10182	Single invoice for Alecia Draper - In re Conservatorship of Emily Reed (10166)		\$6,172.72	\$100.00
03/01/2018	Invoice #10198	Single invoice for Alecia Draper - In re Conservatorship of Emily Reed (10166)		\$725.75	\$825.75
03/02/2018	Payment - Credit Card		\$825.75		0.00

Total Amount Due: \$0.00



Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754

Statement submitted to:

Alecia Draper

Date of Statement: **Friday, March 2, 2018**

Account: **In re
Conservatorship of
Emily Reed**

<u>Date</u>	<u>Item</u>	<u>Description</u>	<u>Credit Amount</u>	<u>Debit Amount</u>	<u>Balance</u>
02/09/2018	Payment - Credit Card		\$2,572.72		(\$2,572.72)
02/13/2018	Payment - Credit Card		\$3,500.00		(\$6,072.72)
02/14/2018	Invoice #10182	Single invoice for Alecia Draper - In re Conservatorship of Emily Reed (10166)		\$6,172.72	\$100.00
03/01/2018	Invoice #10198	Single invoice for Alecia Draper - In re Conservatorship of Emily Reed (10166)		\$725.75	\$825.75
03/02/2018	Payment - Credit Card		\$825.75		0.00

Total Amount Due: \$0.00

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10198

Date	Mar 01, 2018
Terms	
Service Thru	Mar 01, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
02/15/2018	NS	Draft: Reviewed and revised Petition for Conservatorship forms for general conservatorship.	1.10	\$ 250.00/hr	\$ 275.00
02/22/2018	NS	Draft: Reviewed and revised Petition for Conservatorship forms.	0.40	\$ 250.00/hr	\$ 100.00
02/22/2018	NS	Review: Reviewed and finalized conservatorship forms and emailed paralegal Trang Nguyen re same.	0.20	\$ 250.00/hr	\$ 50.00
02/23/2018	TN	Phone Call: Called court clerk to confirm hearing date re Amended Petition for Conservatorship	0.20	\$ 100.00/hr	\$ 20.00
02/23/2018	NS	Correspondence: Conferred with paralegal Trang Nguyen re e-filing Petition for Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
02/23/2018	TN	Review: Reviewed final Amended Petition, organized, and e-filed Amended petition, declarations, notice of hearing, and confidential supplemental information to Central Justice Center court	0.70	\$ 100.00/hr	\$ 70.00
02/23/2018	NS	Review: Reviewed and organized e-filed Petition for Conservatorship paperwork in client's case file.	0.10	\$ 250.00/hr	\$ 25.00
02/26/2018	NS	Review: Reviewed and responded to client Alecia Draper's email re status of Emily Reed.	0.10	\$ 250.00/hr	\$ 25.00
02/28/2018	TN	Research: Researched General Conservatorship and Limited Conservatorship to determine requirement of Public Defender vs. Investigator to represent conservatee; downloaded and forwarded conformed amended petition and hearing to attorney Natalie Schneider.	0.60	\$ 100.00/hr	\$ 60.00

RESP'T APP 2345

ER 001219

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10198

Date	Mar 01, 2018
Terms	
Service Thru	Mar 01, 2018

02/28/2018	NS	Review: Reviewed research re public defender representing proposed conservatee in a limited conservatorship and reviewed and organized conformed copies of amended petition for general conservatorship in client's case file.	0.30	\$ 250.00/hr	\$ 75.00
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In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
02/23/2018	TN	Printing/Copying: Printed GC 330 Order Appointing Court Investigator	\$ 0.30
02/23/2018	TN	Printing/Copying: Printed GC 020 Notice of hearing Guardianship or Conservatorship	\$ 0.30
02/23/2018	TN	Printing/Copying: Printed Amended petition for appointing conservatorship	\$ 0.15

Total Hours	3.80 hrs
Total Hours	\$ 725.00
Total Expenses	\$ 0.75
Total Invoice Amount	\$ 725.75
Previous Balance	\$ 100.00
Balance (Amount Due)	\$ 825.75

RESP'T APP 2346

ER 001220

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10182

Date	Feb 14, 2018
Terms	
Service Thru	Feb 14, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
01/03/2018	TN	Other: Organize, scan, label and email all documents of client and her daughter's medical history to attorneys Natalie Schneider and Elizabeth Yang	1.20	\$ 100.00/hr	\$ 120.00
01/03/2018	NS	Review: Reviewed and organized forms in regard to conservatorship of emily reed in client's case file.	0.30	\$ 250.00/hr	\$ 75.00
01/10/2018	NS	Phone Call: Conferred with client Alecia Draper re temporary conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/17/2018	NS	Review: Reviewed and analyzed client Alecia Draper's case file for temporary conservatorship of daughter Emily Reed.	1.40	\$ 250.00/hr	\$ 350.00
01/17/2018	NS	Research: Researched Ex Parte Conservatorship for temporary conservatorship in Orange County.	0.30	\$ 250.00/hr	\$ 75.00
01/17/2018	NS	Research: Researched notice requirements for temporary conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
01/17/2018	NS	Phone Call: Left voice message for client Alecia Draper re temporary conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/17/2018	NS	Draft: Drafted GC-111 Petition for Appointment of Temporary Conservator.	0.50	\$ 250.00/hr	\$ 125.00
01/17/2018	NS	Draft: Drafted GC-111 Petition for Temporary Conservatorship.	0.40	\$ 250.00/hr	\$ 100.00
01/18/2018	NS	Phone Call: Conferred with client Alecia Draper re temporary conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
01/18/2018	NS	Draft: Drafted GC-111 Petition for temporary guardianship.	0.40	\$ 250.00/hr	\$ 100.00

RESP'T APP 2347

ER 001221

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10182

Date	Feb 14, 2018
Terms	
Service Thru	Feb 14, 2018

01/18/2018	NS	Phone Call: Called and left voice message for Dr. Farrell re Capacity Declaration and drafted GC-355 Capacity Declaration.	0.40	\$ 250.00/hr	\$ 100.00
01/18/2018	NS	Draft: Drafted Declaration of Alecia Draper.	1.30	\$ 250.00/hr	\$ 325.00
01/18/2018	NS	Draft: Drafted GC-310 Petition for Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/18/2018	NS	Draft: Drafted GC-310 Petition for Conservatorship.	0.70	\$ 250.00/hr	\$ 175.00
01/18/2018	NS	Draft: Drafted GC-310 Petition for Conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
01/19/2018	NS	Draft: Drafted Confidential Information form.	0.50	\$ 250.00/hr	\$ 125.00
01/19/2018	NS	Draft: Drafted Confidential Supplemental Information.	0.50	\$ 250.00/hr	\$ 125.00
01/19/2018	NS	Correspondence: Emailed client Alecia Draper re Conservatorship forms to sign.	0.30	\$ 250.00/hr	\$ 75.00
01/19/2018	NS	Research: Researched limited conservatorship and emailed client Alecia Draper re same.	0.20	\$ 250.00/hr	\$ 50.00
01/19/2018	NS	Phone Call: Conferred with client Alecia Draper re limited conservatorship.	0.40	\$ 250.00/hr	\$ 100.00
01/23/2018	NS	Draft: Drafted correspondence to Dr. Farrell re Capacity Declaration and faxed same to Dr. Farrell's office.	0.50	\$ 250.00/hr	\$ 125.00
01/23/2018	NS	Draft: Revised Declaration of client Alecia Draper and left voice message for client re same.	0.40	\$ 250.00/hr	\$ 100.00
01/23/2018	NS	Draft: Revised GC-11 Petition for Appointment of Temporary Conservator of Person and Estate.	0.30	\$ 250.00/hr	\$ 75.00
01/23/2018	NS	Review: Reviewed and revised GC-310 Petition for Appointment of Probate Conservator.	0.20	\$ 250.00/hr	\$ 50.00
01/23/2018	NS	Phone Call: Conferred with client Alecia Draper re limited conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
01/23/2018	NS	Review: Reviewed and revised Petition for temporary and limited conservatorship.	0.40	\$ 250.00/hr	\$ 100.00

RESP'T APP 2348

ER 001222

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10182

Date	Feb 14, 2018
Terms	
Service Thru	Feb 14, 2018

01/23/2018	NS	Draft: Reviewed and revised GC-314 Confidential Conservator Screening Form and GC-312 Confidential Supplemental Information.	0.40	\$ 250.00/hr	\$ 100.00
01/23/2018	NS	Correspondence: Emailed client Alecia Draper re conservatorship forms.	0.20	\$ 250.00/hr	\$ 50.00
01/23/2018	NS	Draft: Drafted GC-330 Proposed Order Appointing Court Investigator.	0.10	\$ 250.00/hr	\$ 25.00
01/23/2018	NS	Draft: Drafted Proposed Order, reviewed case file, and emailed client Alecia Draper re Petition for temporary conservatorship.	0.40	\$ 250.00/hr	\$ 100.00
01/24/2018	NS	Correspondence: Emailed Malina Thaxton Capacity Declaration.	0.10	\$ 250.00/hr	\$ 25.00
01/24/2018	NS	Review: Reviewed and organized signed conservatorship forms from client Alecia Draper, researched notice requirements for Ex Parte Applications of Temporary Conservatorship, and emailed client re same.	1.00	\$ 250.00/hr	\$ 250.00
01/25/2018	NS	Phone Call: Listened to voice message from client Alecia Draper and returned call and left voice message re same.	0.10	\$ 250.00/hr	\$ 25.00
01/25/2018	NS	Phone Call: Conferred with client Alecia Draper re revisions to conservatorship paperwork and status with criminal case.	0.40	\$ 250.00/hr	\$ 100.00
01/25/2018	NS	Review: Reviewed completed Capacity Declaration from Dr. Farrell and organized same in client's case file.	0.20	\$ 250.00/hr	\$ 50.00
01/25/2018	NS	Review: Reviewed and responded to client Alecia Draper's email correspondences re conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
01/25/2018	NS	Phone Call: Conferred with client Alecia Draper re Petition for conservatorship.	0.20	\$ 250.00/hr	\$ 50.00

RESP'T APP 2349

ER 001223

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10182

Date	Feb 14, 2018
Terms	
Service Thru	Feb 14, 2018

01/25/2018	NS	Review: Reviewed case file and researched Probate Code re conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/26/2018	NS	Review: Reviewed and revised conservatorship documents and conferred with client Alecia Draper and attorney Elizabeth Yang re same.	1.30	\$ 250.00/hr	\$ 325.00
01/26/2018	NS	Phone Call: Met and conferred with paralegal Trang Nguyen re finalizing and filing conservatorship paperwork and made phone calls to first and second-degree relatives re petition for temporary conservatorship.	0.50	\$ 250.00/hr	\$ 125.00
01/26/2018	TN	Review: Finalized Petition for Appointment of Temporary Conservator, Supplemental Information, Order on appointing Conservator, Declarations, Petition for Appointment of Probate Conservator; Filed Petition of Conservatorship to Orange, Central Justice Center	1.50	\$ 100.00/hr	\$ 150.00
01/26/2018	NS	Review: Reviewed finalized conservatorship forms re Petition for Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/26/2018	NS	Draft: Drafted Notice of Hearing and emailed paralegal Trang Nguyen re same.	0.20	\$ 250.00/hr	\$ 50.00
01/29/2018	NS	Correspondence: Reviewed and responded to client Alecia Draper's email re hearing date.	0.10	\$ 250.00/hr	\$ 25.00
01/29/2018	TN	Other: Re-file Petition for Conservator for Person and Estate following Clerk's suggestion	0.60	\$ 100.00/hr	\$ 60.00
01/29/2018	NS	Review: Reviewed and organized filed conservatorship forms in client's case file.	0.20	\$ 250.00/hr	\$ 50.00
01/29/2018	NS	Correspondence: Reviewed and responded to client Alecia Draper's email correspondence re Capacity Declaration.	0.20	\$ 250.00/hr	\$ 50.00

RESP'T APP 2350

ER 001224

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10182

Date	Feb 14, 2018
Terms	
Service Thru	Feb 14, 2018

01/30/2018	TN	Other: Downloaded conformed copies of Petition paperwork, communicated with attorney Natalie Schneider about case status and calendared hearings	0.30	\$ 100.00/hr	\$ 30.00
01/30/2018	NS	Review: Reviewed and organized conformed copies of Petition for Conservatorship paperwork in client's case file, researched the Probate Code re service, and met and conferred with paralegal Trang Nguyen re same.	0.50	\$ 250.00/hr	\$ 125.00
01/30/2018	TN	Other: Called court clerk to request hearing continuance for Ex Parte	0.10	\$ 100.00/hr	\$ 10.00
01/30/2018	NS	Correspondence: Emailed client Alecia Draper re conservatorship hearings and service of paperwork.	0.20	\$ 250.00/hr	\$ 50.00
01/30/2018	NS	Phone Call: Conferred with client Alecia Draper re temporary conservatorship hearing and conferred with paralegal Trang Nguyen re same.	0.20	\$ 250.00/hr	\$ 50.00
01/30/2018	NS	Phone Call: Conferred with client Alecia Draper re hearing on temporary conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
01/31/2018	NS	Meeting: Met and conferred with paralegal Trang Nguyen re serving Petition for Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/31/2018	TN	Other: Researched competitive prices regarding Process Service in Las Vegas and placed order to serve Jeffrey Allen	0.70	\$ 100.00/hr	\$ 70.00
01/31/2018	TN	Other: Drafted GC-020 Proof of Service by Mail; organized, printed GC 111 Petition for Temporary Conservator, GC 310 Petition for Limited Conservatorship, Proposed Order, and prepared mailing postage to serve Anthony Reed, Adam Reed, Penny Reed, Pete Reed, John Masaitis, Virginia Masaitis, Elizabeth Olden and Thomas Olden	1.50	\$ 100.00/hr	\$ 150.00

RESP'T APP 2351

ER 001225

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10182

Date	Feb 14, 2018
Terms	
Service Thru	Feb 14, 2018

02/01/2018	NS	Correspondence: Reviewed and responded to email correspondence from paralegal Trang Nguyen re serving relatives and e-filing Proofs of Service and Capacity Declaration.	0.20	\$ 250.00/hr	\$ 50.00
02/01/2018	TN	Other: File Proof of Service and Capacity Declaration re Conservatorship to Probate court; Ordered Personal Service for Emily Reed	0.30	\$ 100.00/hr	\$ 30.00
02/01/2018	NS	Review: Reviewed and organized e-filed Capacity Declaration and Proof of Service in client's case file.	0.10	\$ 250.00/hr	\$ 25.00
02/01/2018	NS	Correspondence: Emailed paralegal Trang Nguyen re process service and organized conformed copies of Proof of Service and Capacity Declaration in client's case file.	0.10	\$ 250.00/hr	\$ 25.00
02/02/2018	NS	Correspondence: Emailed client Alecia Draper re process serving.	0.10	\$ 250.00/hr	\$ 25.00
02/02/2018	NS	Phone Call: Conferred with client Alecia Draper re process serving.	0.20	\$ 250.00/hr	\$ 50.00
02/02/2018	TN	Phone Call: Called process server to update information on timing and location of Jeffrey and Alecia	0.20	\$ 100.00/hr	\$ 20.00
02/02/2018	NS	Correspondence: Emailed paralegal Trang Nguyen re printing and assembling conservatorship forms in preparation for hearing on temporary conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
02/02/2018	NS	Phone Call: Conferred with Jeffrey Reed re Petition for Temporary Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
02/02/2018	TN	Other: Prepared conformed papers in prepare for Ex Parte hearing per request of Attorney Natalie Schneider	0.20	\$ 100.00/hr	\$ 20.00
02/02/2018	NS	Phone Call: Conferred with client Alecia Draper re phone call with Jeffrey Reed.	0.10	\$ 250.00/hr	\$ 25.00

RESP'T APP 2352

ER 001226

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10182

Date	Feb 14, 2018
Terms	
Service Thru	Feb 14, 2018

02/02/2018	NS	Review: Reviewed Order After Hearing regarding child support.	0.20	\$ 250.00/hr	\$ 50.00
02/02/2018	NS	Correspondence: Reviewed Order After Hearing and emailed client Alecia Draper re same.	0.20	\$ 250.00/hr	\$ 50.00
02/05/2018	TN	Other: Inquire status of personal service on Jeffrey Reed and Emily Reed and proof of service	0.10	\$ 100.00/hr	\$ 10.00
02/05/2018	NS	Correspondence: Reviewed and responded to email correspondence from client Alecia Draper and reviewed and organized Order After Hearing re child support in client's case file in preparation for hearing.	0.20	\$ 250.00/hr	\$ 50.00
02/05/2018	NS	Court Time: Attended hearing for temporary conservatorship to further client's cause.	1.40	\$ 250.00/hr	\$ 350.00
02/05/2018	NS	Phone Call: Conferred with client Alecia Draper re outcome of ex parte hearing on temporary conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
02/05/2018	NS	Correspondence: Emailed attorney Elizabeth Yang re outcome of ex parte hearing for temporary conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
02/12/2018	NS	Review: Reviewed and analyzed client Alecia Draper's Opposition to Motion for Summary Judgment and reviewed and responded to email from client.	0.40	\$ 250.00/hr	\$ 100.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
01/23/2018	NS	Printing/Copying: Printed correspondence and Capacity Declaration	\$ 0.60
01/26/2018	TN	Printing/Copying: Printed Petition for Appointment of Temporary Conservator, Supplemental Information, Order on appointing Conservator, Declarations, Petition for Appointment of Probate Conservator	\$ 3.30

RESP'T APP 2353

ER 001227

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10182

Date	Feb 14, 2018
Terms	
Service Thru	Feb 14, 2018

01/31/2018	TN	Printing/Copying: Printed 8 copies of GC 020 Notice of Hearing and Proof of service by Mail to serve Alecia's relatives	\$ 3.60
01/31/2018	TN	Printing/Copying: Printed 8 copies of GC-310_Petition for Appointment of Proposed Conservator to serve Alecia's relatives	\$ 9.60
01/31/2018	TN	Printing/Copying: Printed 8 copies of GC-111_Petition for Appointment of Temporary Conservator to serve Alecia's relatives	\$ 10.80
01/31/2018	TN	Printing/Copying: Printed 8 copies Proposed Order to serve Alecia's relatives	\$ 1.20
01/31/2018	TN	Mailing/Postage: Mailing postage, include first class and priority mail for serving 8 relatives in Cypress, Huntington Beach, Arizona, and Pittsburgh with Petition of Conservatorship for Emily Reed	\$ 33.62
02/02/2018	TN	Printing/Copying: Print Notice of Hearing of Conservatorship	\$ 0.45
02/02/2018	TN	Printing/Copying: Printed Capacity Declaration Conservatorship	\$ 0.45
02/02/2018	TN	Printing/Copying: Printed 1 copy of Propose Order	\$ 0.15
02/02/2018	TN	Printing/Copying: Printed 1 copy of Petition for Appointment of Temporary Conservator with attachment	\$ 1.35
02/02/2018	TN	Printing/Copying: Printed 1 copy of Confidential Conservator Screening Form	\$ 0.60
02/02/2018	TN	Printing/Copying: Printed 1 copy of Confidential Supplemental Information	\$ 0.60
02/02/2018	TN	Printing/Copying: Printed 1 copy of Petition for Appointment of Probate conservator of Person	\$ 1.20
02/05/2018	NS	Printing/Copying: Printed Order After Hearing	\$ 1.20

RESP'T APP 2354

ER 001228

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10182

Date	Feb 14, 2018
Terms	
Service Thru	Feb 14, 2018

02/05/2018 NS Parking: Central Justice Center parking \$ 9.00

Total Hours 28.40 hrs

Total Hours \$ 6,095.00

Total Expenses \$ 77.72

Total Invoice Amount \$ 6,172.72

Previous Balance \$ 0.00

Balance (Amount Due) \$ 100.00

Payment History:

Date	Type	Payment Description	Amount
02/09/2018	Payment - Credit Card		(\$2,572.72)
02/13/2018	Payment - Credit Card		(\$3,500.00)

RESP'T APP 2355

ER 001229

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10178

Date	Feb 08, 2018
Terms	
Service Thru	Feb 08, 2018

In Reference To: In re Conservatorship of Emily Reed (Hours)

Date	By	Services	Hours	Rates	Amount
01/03/2018	TN	Other: Organize, scan, label and email all documents of client and her daughter's medical history to attorneys Natalie Schneider and Elizabeth Yang	1.20	\$ 100.00/hr	\$ 120.00
01/03/2018	NS	Review: Reviewed and organized forms in regard to conservatorship of emily reed in client's case file.	0.30	\$ 250.00/hr	\$ 75.00
01/10/2018	NS	Phone Call: Conferred with client Alecia Draper re temporary conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/17/2018	NS	Review: Reviewed and analyzed client Alecia Draper's case file for temporary conservatorship of daughter Emily Reed.	1.40	\$ 250.00/hr	\$ 350.00
01/17/2018	NS	Research: Researched Ex Parte Conservatorship for temporary conservatorship in Orange County.	0.30	\$ 250.00/hr	\$ 75.00
01/17/2018	NS	Research: Researched notice requirements for temporary conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
01/17/2018	NS	Phone Call: Left voice message for client Alecia Draper re temporary conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/17/2018	NS	Draft: Drafted GC-111 Petition for Appointment of Temporary Conservator.	0.50	\$ 250.00/hr	\$ 125.00
01/17/2018	NS	Draft: Drafted GC-111 Petition for Temporary Conservatorship.	0.40	\$ 250.00/hr	\$ 100.00
01/18/2018	NS	Phone Call: Conferred with client Alecia Draper re temporary conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
01/18/2018	NS	Draft: Drafted GC-111 Petition for temporary guardianship.	0.40	\$ 250.00/hr	\$ 100.00

RESP'T APP 2356

ER 001230

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10178

Date	Feb 08, 2018
Terms	
Service Thru	Feb 08, 2018

01/18/2018	NS	Phone Call: Called and left voice message for Dr. Farrell re Capacity Declaration and drafted GC-355 Capacity Declaration.	0.40	\$ 250.00/hr	\$ 100.00
01/18/2018	NS	Draft: Drafted Declaration of Alecia Draper.	1.30	\$ 250.00/hr	\$ 325.00
01/18/2018	NS	Draft: Drafted GC-310 Petition for Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/18/2018	NS	Draft: Drafted GC-310 Petition for Conservatorship.	0.70	\$ 250.00/hr	\$ 175.00
01/18/2018	NS	Draft: Drafted GC-310 Petition for Conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
01/19/2018	NS	Draft: Drafted Confidential Information form.	0.50	\$ 250.00/hr	\$ 125.00
01/19/2018	NS	Draft: Drafted Confidential Supplemental Information.	0.50	\$ 250.00/hr	\$ 125.00
01/19/2018	NS	Correspondence: Emailed client Alecia Draper re Conservatorship forms to sign.	0.30	\$ 250.00/hr	\$ 75.00
01/19/2018	NS	Research: Researched limited conservatorship and emailed client Alecia Draper re same.	0.20	\$ 250.00/hr	\$ 50.00
01/19/2018	NS	Phone Call: Conferred with client Alecia Draper re limited conservatorship.	0.40	\$ 250.00/hr	\$ 100.00
01/23/2018	NS	Draft: Drafted correspondence to Dr. Farrell re Capacity Declaration and faxed same to Dr. Farrell's office.	0.50	\$ 250.00/hr	\$ 125.00
01/23/2018	NS	Draft: Revised Declaration of client Alecia Draper and left voice message for client re same.	0.40	\$ 250.00/hr	\$ 100.00
01/23/2018	NS	Draft: Revised GC-11 Petition for Appointment of Temporary Conservator of Person and Estate.	0.30	\$ 250.00/hr	\$ 75.00
01/23/2018	NS	Review: Reviewed and revised GC-310 Petition for Appointment of Probate Conservator.	0.20	\$ 250.00/hr	\$ 50.00
01/23/2018	NS	Phone Call: Conferred with client Alecia Draper re limited conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
01/23/2018	NS	Review: Reviewed and revised Petition for temporary and limited conservatorship.	0.40	\$ 250.00/hr	\$ 100.00

RESP'T APP 2357

ER 001231

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10178

Date	Feb 08, 2018
Terms	
Service Thru	Feb 08, 2018

01/23/2018	NS	Draft: Reviewed and revised GC-314 Confidential Conservator Screening Form and GC-312 Confidential Supplemental Information.	0.40	\$ 250.00/hr	\$ 100.00
01/23/2018	NS	Correspondence: Emailed client Alecia Draper re conservatorship forms.	0.20	\$ 250.00/hr	\$ 50.00
01/23/2018	NS	Draft: Drafted GC-330 Proposed Order Appointing Court Investigator.	0.10	\$ 250.00/hr	\$ 25.00
01/23/2018	NS	Draft: Drafted Proposed Order, reviewed case file, and emailed client Alecia Draper re Petition for temporary conservatorship.	0.40	\$ 250.00/hr	\$ 100.00
01/24/2018	NS	Correspondence: Emailed Malina Thaxton Capacity Declaration.	0.10	\$ 250.00/hr	\$ 25.00
01/24/2018	NS	Review: Reviewed and organized signed conservatorship forms from client Alecia Draper, researched notice requirements for Ex Parte Applications of Temporary Conservatorship, and emailed client re same.	1.00	\$ 250.00/hr	\$ 250.00
01/25/2018	NS	Phone Call: Listened to voice message from client Alecia Draper and returned call and left voice message re same.	0.10	\$ 250.00/hr	\$ 25.00
01/25/2018	NS	Phone Call: Conferred with client Alecia Draper re revisions to conservatorship paperwork and status with criminal case.	0.40	\$ 250.00/hr	\$ 100.00
01/25/2018	NS	Review: Reviewed completed Capacity Declaration from Dr. Farrell and organized same in client's case file.	0.20	\$ 250.00/hr	\$ 50.00
01/25/2018	NS	Review: Reviewed and responded to client Alecia Draper's email correspondences re conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
01/25/2018	NS	Phone Call: Conferred with client Alecia Draper re Petition for conservatorship.	0.20	\$ 250.00/hr	\$ 50.00

RESP'T APP 2358

ER 001232

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10178

Date	Feb 08, 2018
Terms	
Service Thru	Feb 08, 2018

01/25/2018	NS	Review: Reviewed case file and researched Probate Code re conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/26/2018	NS	Review: Reviewed and revised conservatorship documents and conferred with client Alecia Draper and attorney Elizabeth Yang re same.	1.30	\$ 250.00/hr	\$ 325.00
01/26/2018	NS	Phone Call: Met and conferred with paralegal Trang Nguyen re finalizing and filing conservatorship paperwork and made phone calls to first and second-degree relatives re petition for temporary conservatorship.	0.50	\$ 250.00/hr	\$ 125.00
01/26/2018	TN	Review: Finalized Petition for Appointment of Temporary Conservator, Supplemental Information, Order on appointing Conservator, Declarations, Petition for Appointment of Probate Conservator; Filed Petition of Conservatorship to Orange, Central Justice Center	1.50	\$ 100.00/hr	\$ 150.00
01/26/2018	NS	Review: Reviewed finalized conservatorship forms re Petition for Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/26/2018	NS	Draft: Drafted Notice of Hearing and emailed paralegal Trang Nguyen re same.	0.20	\$ 250.00/hr	\$ 50.00
01/29/2018	NS	Correspondence: Reviewed and responded to client Alecia Draper's email re hearing date.	0.10	\$ 250.00/hr	\$ 25.00
01/29/2018	TN	Other: Re-file Petition for Conservator for Person and Estate following Clerk's suggestion	0.60	\$ 100.00/hr	\$ 60.00
01/29/2018	NS	Review: Reviewed and organized filed conservatorship forms in client's case file.	0.20	\$ 250.00/hr	\$ 50.00
01/29/2018	NS	Correspondence: Reviewed and responded to client Alecia Draper's email correspondence re Capacity Declaration.	0.20	\$ 250.00/hr	\$ 50.00

RESP'T APP 2359

ER 001233

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10178

Date	Feb 08, 2018
Terms	
Service Thru	Feb 08, 2018

01/30/2018	TN	Other: Downloaded conformed copies of Petition paperwork, communicated with attorney Natalie Schneider about case status and calendared hearings	0.30	\$ 100.00/hr	\$ 30.00
01/30/2018	NS	Review: Reviewed and organized conformed copies of Petition for Conservatorship paperwork in client's case file, researched the Probate Code re service, and met and conferred with paralegal Trang Nguyen re same.	0.50	\$ 250.00/hr	\$ 125.00
01/30/2018	TN	Other: Called court clerk to request hearing continuance for Ex Parte	0.10	\$ 100.00/hr	\$ 10.00
01/30/2018	NS	Correspondence: Emailed client Alecia Draper re conservatorship hearings and service of paperwork.	0.20	\$ 250.00/hr	\$ 50.00
01/30/2018	NS	Phone Call: Conferred with client Alecia Draper re temporary conservatorship hearing and conferred with paralegal Trang Nguyen re same.	0.20	\$ 250.00/hr	\$ 50.00
01/30/2018	NS	Phone Call: Conferred with client Alecia Draper re hearing on temporary conservatorship.	0.20	\$ 250.00/hr	\$ 50.00
01/31/2018	NS	Meeting: Met and conferred with paralegal Trang Nguyen re serving Petition for Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
01/31/2018	TN	Other: Researched competitive prices regarding Process Service in Las Vegas and placed order to serve Jeffrey Allen	0.70	\$ 100.00/hr	\$ 70.00
01/31/2018	TN	Other: Drafted GC-020 Proof of Service by Mail; organized, printed GC 111 Petition for Temporary Conservator, GC 310 Petition for Limited Conservatorship, Proposed Order, and prepared mailing postage to serve Anthony Reed, Adam Reed, Penny Reed, Pete Reed, John Masaitis, Virginia Masaitis, Elizabeth Olden and Thomas Olden	1.50	\$ 100.00/hr	\$ 150.00

RESP'T APP 2360

ER 001234

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10178

Date	Feb 08, 2018
Terms	
Service Thru	Feb 08, 2018

02/01/2018	NS	Correspondence: Reviewed and responded to email correspondence from paralegal Trang Nguyen re serving relatives and e-filing Proofs of Service and Capacity Declaration.	0.20	\$ 250.00/hr	\$ 50.00
02/01/2018	TN	Other: File Proof of Service and Capacity Declaration re Conservatorship to Probate court; Ordered Personal Service for Emily Reed	0.30	\$ 100.00/hr	\$ 30.00
02/01/2018	NS	Review: Reviewed and organized e-filed Capacity Declaration and Proof of Service in client's case file.	0.10	\$ 250.00/hr	\$ 25.00
02/01/2018	NS	Correspondence: Emailed paralegal Trang Nguyen re process service and organized conformed copies of Proof of Service and Capacity Declaration in client's case file.	0.10	\$ 250.00/hr	\$ 25.00
02/02/2018	NS	Correspondence: Emailed client Alecia Draper re process serving.	0.10	\$ 250.00/hr	\$ 25.00
02/02/2018	NS	Phone Call: Conferred with client Alecia Draper re process serving.	0.20	\$ 250.00/hr	\$ 50.00
02/02/2018	TN	Phone Call: Called process server to update information on timing and location of Jeffrey and Alecia	0.20	\$ 100.00/hr	\$ 20.00
02/02/2018	NS	Correspondence: Emailed paralegal Trang Nguyen re printing and assembling conservatorship forms in preparation for hearing on temporary conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
02/02/2018	NS	Phone Call: Conferred with Jeffrey Reed re Petition for Temporary Conservatorship.	0.10	\$ 250.00/hr	\$ 25.00
02/02/2018	TN	Other: Prepared conformed papers in prepare for Ex Parte hearing per request of Attorney Natalie Schneider	0.20	\$ 100.00/hr	\$ 20.00
02/02/2018	NS	Phone Call: Conferred with client Alecia Draper re phone call with Jeffrey Reed.	0.10	\$ 250.00/hr	\$ 25.00

RESP'T APP 2361

ER 001235

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10178

Date	Feb 08, 2018
Terms	
Service Thru	Feb 08, 2018

02/02/2018	NS	Review: Reviewed Order After Hearing regarding child support.	0.20	\$ 250.00/hr	\$ 50.00
02/02/2018	NS	Correspondence: Reviewed Order After Hearing and emailed client Alecia Draper re same.	0.20	\$ 250.00/hr	\$ 50.00
02/05/2018	TN	Other: Inquire status of personal service on Jeffrey Reed and Emily Reed and proof of service	0.10	\$ 100.00/hr	\$ 10.00
02/05/2018	NS	Correspondence: Reviewed and responded to email correspondence from client Alecia Draper and reviewed and organized Order After Hearing re child support in client's case file in preparation for hearing.	0.20	\$ 250.00/hr	\$ 50.00
02/05/2018	NS	Court Time: Attended hearing for temporary conservatorship to further client's cause.	1.40	\$ 250.00/hr	\$ 350.00
02/05/2018	NS	Phone Call: Conferred with client Alecia Draper re outcome of ex parte hearing on temporary conservatorship.	0.30	\$ 250.00/hr	\$ 75.00
02/05/2018	NS	Correspondence: Emailed attorney Elizabeth Yang re outcome of ex parte hearing for temporary conservatorship.	0.10	\$ 250.00/hr	\$ 25.00

In Reference To: In re Conservatorship of Emily Reed (Expenses)

Date	By	Expenses	Amount
01/23/2018	NS	Printing/Copying: Printed correspondence and Capacity Declaration	\$ 0.60
01/26/2018	TN	Printing/Copying: Printed Petition for Appointment of Temporary Conservator, Supplemental Information, Order on appointing Conservator, Declarations, Petition for Appointment of Probate Conservator	\$ 3.30
01/31/2018	TN	Printing/Copying: Printed 8 copies of GC 020 Notice of Hearing and Proof of service by Mail to serve Alecia's relatives	\$ 3.60

RESP'T APP 2362

ER 001236

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10178

Date	Feb 08, 2018
Terms	
Service Thru	Feb 08, 2018

01/31/2018	TN	Printing/Copying: Printed 8 copies of GC-310_Petition for Appointment of Proposed Conservator to serve Alecia's relatives	\$ 9.60
01/31/2018	TN	Printing/Copying: Printed 8 copies of GC-111_Petition for Appointment of Temporary Conservator to serve Alecia's relatives	\$ 10.80
01/31/2018	TN	Printing/Copying: Printed 8 copies Proposed Order to serve Alecia's relatives	\$ 1.20
01/31/2018	TN	Mailing/Postage: Mailing postage, include first class and priority mail for serving 8 relatives in Cypress, Huntington Beach, Arizona, and Pittsburgh with Petition of Conservatorship for Emily Reed	\$ 33.62
02/02/2018	TN	Printing/Copying: Print Notice of Hearing of Conservatorship	\$ 0.45
02/02/2018	TN	Printing/Copying: Printed Capacity Declaration Conservatorship	\$ 0.45
02/02/2018	TN	Printing/Copying: Printed 1 copy of Propose Order	\$ 0.15
02/02/2018	TN	Printing/Copying: Printed 1 copy of Petition for Appointment of Temporary Conservator with attachment	\$ 1.35
02/02/2018	TN	Printing/Copying: Printed 1 copy of Confidential Conservator Screening Form	\$ 0.60
02/02/2018	TN	Printing/Copying: Printed 1 copy of Confidential Supplemental Information	\$ 0.60
02/02/2018	TN	Printing/Copying: Printed 1 copy of Petition for Appointment of Probate conservator of Person	\$ 1.20
02/05/2018	NS	Printing/Copying: Printed Order After Hearing	\$ 1.20
02/05/2018	NS	Parking: Central Justice Center parking	\$ 9.00

RESP'T APP 2363 ^{Total Hours} 28.00 hrs

ER 001237

Law Offices of Elizabeth Yang
199 West Garvey Ave
Suite 201
Monterey Park, CA 91754



Alecia Draper

Invoice 10178

Date	Feb 08, 2018
Terms	
Service Thru	Feb 08, 2018

Total Hours	\$ 5,995.00
Total Expenses	\$ 77.72
Total Invoice Amount	\$ 6,072.72
Previous Balance	\$ 0.00
Balance (Amount Due)	\$ 2,572.72

Payment History:

Date	Type	Payment Description	Amount
12/13/2017	Payment - Credit Card		(\$3,500.00)

RESP'T APP 2364

ER 001238



LAW & MEDIATION OFFICES OF ELIZABETH YANG

Attorneys and Counselors at Law

199 W. Garvey Ave., Suite 201, Monterey Park, CA 91754 • (877)4-YANGLAW

Elizabeth@YangLawOffices.com • www.YangLawOffices.com

RETAINER AGREEMENT

Scope of Agreement

This Agreement is to confirm that Alecia Draper (hereinafter referred to as "Client") has retained the services of the Law & Mediation Offices of Elizabeth Yang ("Attorneys"), to provide Limited Scope of Services to represent Client's interests as related to representation in a conservatorship of her daughter.

Although Attorneys services are limited at this time to the specific matter referred to above, the terms of this agreement will apply to any other matter that Attorneys undertake to handle for Client, unless a separate agreement covers such other matter.

Attorneys hereby designate Elizabeth Yang as lead counsel to provide the Limited Scope of Services under this Agreement; provided, however, that the lead counsels shall have the discretion to utilize the services of any of the partners, associates, agents, paralegals, law clerks, independent contractors, of counsel, or staff of Attorneys in connection with services to be undertaken under this Agreement.

Duties of Attorneys and Client

Attorneys shall provide those legal services reasonably required to represent Client in the Limited Scope of Services. Attorneys shall also take reasonable steps to keep Client informed of significant developments and to respond to Client's inquiries.

Client shall be truthful with Attorneys; cooperate with Attorneys; keep Attorneys informed of all developments, documents or facts that would affect the provision of the Limited Scope of Services; perform all obligations Client has agreed to perform under this Agreement; pay in a timely manner all of Attorneys' statements for services performed and costs incurred; and keep Attorneys apprised of Client's address, telephone number, and whereabouts.

Billing Rates

Client agrees to pay (jointly and severally, if more than one person/entity is noted above as the Client) for Attorneys' services for all work performed by Attorneys at Attorneys' prevailing hourly rates for the services performed. These rates vary depending upon the experience, expertise and background of the individual professionals and staff. As of the date of this Agreement, the current prevailing hourly rate for Elizabeth Yang is **\$350.00** per hour. This hourly rate, as well as those below, is charged at one-tenths of an hour. The foregoing rates are subject to periodic adjustments.

RESP'T APP 2365

ER 001239

 **LAW & MEDIATION OFFICES OF
ELIZABETH YANG**

Attorneys and Counselors at Law

199 W. Garvey Ave., Suite 201, Monterey Park, CA 91754 • (877)4-YANGLAW

Elizabeth@YangLawOffices.com • www.YangLawOffices.com

Date: February 14, 2018

Name: Alecia Draper

 INVOICE

DESCRIPTION	AMOUNT
Attorney Retainer \$3,500.00	Total Amount- \$3,500.00 (Paid)
TOTAL DUE	\$0

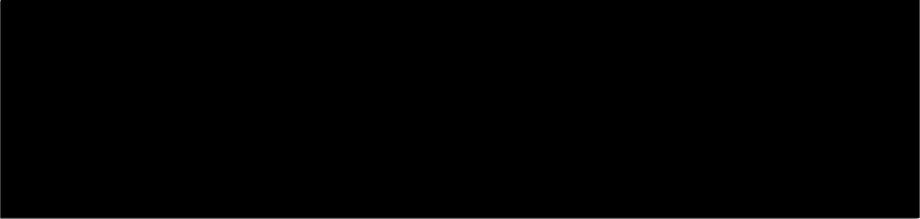
Checks payable to: The Law and Mediation Offices of Elizabeth Yang

Mailing address:

199 W. Garvey Ave., Suite 201
Monterey Park, CA 91754

Wire Transfer Information:

Account Name: Yang Law Offices, P.C. (IOLTA)



RESP'T APP 2366

ER 001240

EXHIBIT 70

EXHIBIT 70

EXHIBIT 70
RESP'T APP 2367

Macy's Account statement



Questions or lost/stolen card? Call Customer Service 1-866-593-2543

Go to macy.com/credit to manage and pay your account online.

ALECIA A KREMIDAS

Account Number: [REDACTED] 4199

Summary of Account Activity

Previous Balance	\$501.85
Payments	-\$200.00
Other Credits	-\$0.00
Purchases/Other Debits	+\$0.00
Fees Charged	+\$0.00
Interest Charged	+\$6.89
New Balance	\$308.74
Past Due Amount	\$0.00

Credit Limit	\$1,000.00
Available Credit	\$691.00
Statement Closing Date	06/11/2019
Next Statement Closing Date	07/12/2019
Days in Billing Cycle	30

Payment Information

New Balance	\$308.74
Minimum Payment Due	\$27.00
Payment Due Date	July 8, 2019

Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee up to \$39.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Only the minimum payment	14 months	\$362

If you would like information about credit counseling services, call 1-877-337-8187.

To allow us to better service your credit needs, please update your financial information on the back of the payment coupon.

Marketing offers included in this statement are intended for residents of the United States, its Territories, and Canada.

Macy's account transactions

Transaction Date	Description	Location	Amount
Jun 05	PAYMENT - THANK YOU		-\$200.00



PLEASE SEE IMPORTANT INFORMATION ON REVERSE SIDE.

Page 1 of 4

This Account is Issued by Department Stores National Bank.



P.O. BOX 8058
MASON, OH 45040-8058



Please return this slip with payment. Write account number on front of check. You can pay at any Macy's store, online at macy.com/credit, or by mail.

Payments received by mail by 5:00 pm local time at the address shown below will be credited as of the date received.

Use reverse side for address changes.

Account Number: [REDACTED] 4199

Payment Due Date	July 8, 2019
New Balance	\$308.74
Minimum Payment Due	\$27.00

Amount Enclosed: \$

Make Check Payable to: Macy's
▼ Mail to address below ▼

BN00047196 1 AV 0.383 LC240758 TMN 012828 0198



ALECIA A KREMIDAS

Macy's
PO BOX 9001094

RESPT APP 2368

ER 001241

07026 0002700 0030674 0020000 06035340541134199 0614

02729026
LOB 204 MBP 5973



Fees

Transaction Date	Description	Amount
	TOTAL FEES FOR THIS PERIOD	\$0.00

Interest Charged

Transaction Date	Description	Amount
Jun 11	INTEREST CHARGE ON PURCHASES	\$6.89
	TOTAL INTEREST FOR THIS PERIOD	\$6.89

2019 Totals Year-to-Date

Total Fees Charged in 2019	\$27.00
Total Interest Charged in 2019	\$13.94

Activity and Promotions Detail

Original Promotion Trans Amount	Promotion Trans Date	Previous Balance	Payments & Other Credits	Purchases, Cash Adv, Fees & Other Debits	Interest Charged	New Balance	Promotion Minimum Payment Due	Deferred Interest Charges	Promotion Expiration Date
MACY'S ACCOUNT TRANSACTIONS									
REGULAR									
-	-	\$501.85	-\$200.00	-	\$6.89	\$308.74	-	-	-
TOTAL		\$501.85	-\$200.00	\$0.00	\$6.89	\$308.74	\$0.00	\$0.00	

Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
MACY'S ACCOUNT TRANSACTIONS			
REGULAR	27.49% (V)	\$305.16	\$6.89
(V) = Variable Rate			

**ENJOY 9
FABULOUS
WINES plus
3 BONUS BOTTLES**

**ONLY \$69.99
with FREE SHIPPING**
when you join the Macy's Wine Cellar Club



ORDER AT macyswinecellar.com/save

Macy's Wine Cellar is operated by Direct Wines, Inc. in conjunction with a licensed network. Your \$110 discount applies to an introductory Macy's Wine Cellar Club case - retail price \$179.99, reduced to \$69.99 with free shipping, plus applicable tax. One case per household. Offer subject to availability and club enrollment. Future club cases will be \$159.99 with free shipping (plus tax). Not redeemable for cash or other offer from Macy's Wine Cellar. Wines and offer may vary. Please drink responsibly. ©2019 Macy's, Inc. All rights reserved. Delivery available to AZ, CA (offer may vary), CO, CT, FL, ID, IL, IN (limited delivery area), LA, MA, MI, MO, NE, NH, NY, OH, OR, TX, VA, WA, WI, WV, WY and DC. See macyswinecellar.com for full terms and conditions. Please drink responsibly. ODW12

RESPITE APP 2369



Macy's Account statement



Questions or lost/stolen card? Call Customer Service 1-866-593-2543



Go to macy.com/credit to manage and pay your account online.

ALECIA A KREMIDAS

Account Number: [REDACTED] 4199

Summary of Account Activity	
Previous Balance	\$68.82
Payments	-\$68.82
Other Credits	-\$0.00
Purchases/Other Debits	+\$501.85
Fees Charged	+\$0.00
Interest Charged	+\$0.00
 New Balance	\$501.85
Past Due Amount	\$0.00

Credit Limit	\$1,000.00
Available Credit	\$498.00
Statement Closing Date	05/12/2019
Next Statement Closing Date	06/11/2019
Days in Billing Cycle	31

Payment Information		
New Balance	\$501.85	
Minimum Payment Due	\$27.00	
Payment Due Date	June 8, 2019	
Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee up to \$38.		
Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:		
If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Only the minimum payment	2 years	\$661
If you would like information about credit counseling services, call 1-877-337-8187.		

Credit Limit	\$1,000.00
Available Credit	\$498.00
Statement Closing Date	05/12/2019
Next Statement Closing Date	06/11/2019
Days in Billing Cycle	31

For phone payments, you authorize Department Stores National Bank to electronically debit your specified bank account by an ACH transaction in the amount and on such date that you indicate on the phone. You may cancel a phone payment by calling us at the Customer Service number at the top of page 1 within the timeframe disclosed to you on the phone.

Marketing offers included in this statement are intended for residents of the United States, its Territories, and Canada.

Macy's account transactions

Transaction Date	Description	Location	Amount
Apr 30	PAYMENT - THANK YOU		-\$68.82

PLEASE SEE IMPORTANT INFORMATION ON REVERSE SIDE.

Page 1 of 4

This Account is Issued by Department Stores National Bank.



P.O. BOX 8058
MASON, OH 45040-8058



Please return this slip with payment. Write account number on front of check. You can pay at any Macy's store, online at macy.com/credit, or by mail.

Payments received by mail by 5:00 pm local time at the address shown below will be credited as of the date received.

Use reverse side for address changes.

Account Number: [REDACTED] 4199

Payment Due Date June 8, 2019
New Balance \$501.85
Minimum Payment Due \$27.00

Amount Enclosed: \$ [REDACTED]

Make Check Payable to: Macy's
▼ Mail to address below ▼

Macy's
PO BOX 9001094
LOUISVILLE KY 40290-1094

RESPIT APP 2370

4501423466 1 AV 0.383 RL237922 TMN 008338 6394



ALECIA A KREMIDAS



02674809
JOB 204 MSP 5545



07001 0002700 0050185 0006882 06035340541134199 0615 ER 001243



Important Changes to Your Account Terms

The following is a summary of certain changes that are being made to your account terms. These changes will take effect on 06/12/19. For more detailed information, please see the Notice of Change in Terms to your Credit Card Agreement below.

Revised Terms, as of 06/12/19

Late Fee	Up to \$39
Returned Payment Fee	Up to \$39

Minimum Payment Due. For any minimum payment calculated after 06/12/19, we are changing the way we calculate your Minimum Payment Due. You may be required to pay more of your account balance each billing cycle. As a result, your Minimum Payment Due may increase.

Macy's account transactions

Transaction Date	Description	Location	Amount
Apr 03	PAYMENT - THANK YOU		-\$3.63
Apr 06	FASHION SHOES - OTHER	BOISE TOWNE SQ	\$39.99
	PB MENS SHOES - INC		\$24.93
	SALES TAX		\$3.90
	RECEIPT TOTAL		\$68.82

Fees

Transaction Date	Description	Amount
	TOTAL FEES FOR THIS PERIOD	\$0.00

Interest Charged

Transaction Date	Description	Amount
	TOTAL INTEREST FOR THIS PERIOD	\$0.00

2019 Totals Year-to-Date

Total Fees Charged in 2019	\$27.00
Total Interest Charged in 2019	\$7.05

Activity and Promotions Detail

Original Promotion Trans Amount	Promotion Trans Date	Previous Balance	Payments & Other Credits	Purchases, Cash Adv, Fees & Other Debits	Interest Charged	New Balance	Promotion Minimum Payment Due	Deferred Interest Charges	Promotion Expiration Date
MACY'S ACCOUNT TRANSACTIONS REGULAR									
-	-	\$3.63	-\$3.63	\$68.82	-	\$68.82	-	-	-
TOTAL		\$3.63	-\$3.63	\$68.82	\$0.00	\$68.82	\$0.00	\$0.00	

Interest Charge Calculation

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
MACY'S ACCOUNT TRANSACTIONS REGULAR	27.49% (V)	\$0.00	\$0.00
(V) = Variable Rate			

RESP'T APP 2372

ER 001245



Macy's Account statement



Questions or lost/stolen card? Call Customer Service 1-866-593-2543



Go to macy.com/credit to manage and pay your account online.

ALECIA A KREMIDAS

Account Number: [REDACTED] 4199

Summary of Account Activity

Previous Balance	\$160.02
Payments	-\$0.00
Other Credits	-\$0.00
Purchases/Other Debits	+\$0.00
Fees Charged	+\$27.00
Interest Charged	+\$3.42
New Balance	\$190.44
Past Due Amount	\$27.00

Credit Limit	\$1,000.00
Available Credit	\$809.00
Statement Closing Date	02/08/2019
Next Statement Closing Date	03/12/2019
Days in Billing Cycle	28

Payment Information

New Balance	\$190.44
Minimum Payment Due	\$59.42
Payment Due Date	March 8, 2019

Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee up to \$38.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Only the minimum payment	7 months	\$205

If you would like information about credit counseling services, call 1-877-337-8188.

Your account is past due.

This is a courtesy reminder that we did not receive a payment. We're here for you and would like to help you bring your account current.

» To make a payment or for further assistance call us today at 1-800-545-1256. For the hearing impaired, call our TTY line at 1-800-281-0820.

Hours of operation:

- Monday - Thursday: 9:00 a.m. to 9:00 p.m. ET
- Friday and Saturday: 9:00 a.m. to 6:00 p.m. ET
- Sunday: 10:00 a.m. to 7:00 p.m. ET

This is an attempt to collect a debt and any information obtained will be used for that purpose.



PLEASE SEE IMPORTANT INFORMATION ON REVERSE SIDE.

Page 1 of 4

This Account is Issued by Department Stores National Bank.



P.O. BOX 8058
MASON, OH 45040-8058



Please return this slip with payment. Write account number on front of check. You can pay at any Macy's store, online at macy.com/credit, or by mail.

Payments received by mail by 5:00 pm local time at the address shown below will be credited as of the date received.

Use reverse side for address changes.

Account Number: [REDACTED] 4199

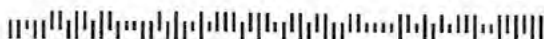
Payment Due Date	March 8, 2019
New Balance	\$190.44
Minimum Payment Due	\$59.42

Amount Enclosed: \$

Make Check Payable to: Macy's
▼ Mail to address below ▼

March 4 19

NL00793162 1 AV 0.378 UU228334 TMN 008170 3656



ALECIA A KREMIDAS



Macy's
PO BOX 9001094

LOUISVILLE KY 40200-1094

RESP'T APP 2374

ER 001247

07001 0005942 0019044 0000732 06035340541134199 0610

706674

01773323
LOB 204 P102



Macy's Account statement



Questions or lost/stolen card? Call Customer Service 1-866-593-2543



Go to macys.com/credit to manage and pay your account online.

ALECIA A KREMIDAS

Account Number: [REDACTED] 4199

Summary of Account Activity

Previous Balance	\$7.32
Payments	-\$7.32
Other Credits	-\$0.00
Purchases/Other Debits	+\$160.02
Fees Charged	+\$0.00
Interest Charged	+\$0.00
New Balance	\$160.02
Past Due Amount	\$0.00

Credit Limit	\$1,000.00
Available Credit	\$839.00
Statement Closing Date	01/11/2019
Next Statement Closing Date	02/08/2019
Days in Billing Cycle	30

Payment Information

New Balance	\$160.02
Minimum Payment Due	\$27.00
Payment Due Date	February 8, 2019

Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee up to \$38.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Only the minimum payment	7 months	\$174

If you would like information about credit counseling services, call 1-877-337-8187.

Credit Limit	\$1,000.00
Available Credit	\$839.00
Statement Closing Date	01/11/2019
Next Statement Closing Date	02/08/2019
Days in Billing Cycle	30

Please see the enclosed **privacy notice** for important information.

For phone payments, you authorize Department Stores National Bank to **electronically debit your specified bank account by an ACH transaction** in the amount and on such date that you indicate on the phone. You may cancel a phone payment by calling us at the Customer Service number at the top of page 1 within the timeframe disclosed to you on the phone.

Marketing offers included in this statement are intended for residents of the United States, its Territories, and Canada.

Macy's account transactions

Transaction Date	Description	Location	Amount
Dec 24	PAYMENT - THANK YOU		-\$7.32



PLEASE SEE IMPORTANT INFORMATION ON REVERSE SIDE.

Page 1 of 10

This Account is Issued by Department Stores National Bank.



P.O. BOX 8058
MASON, OH 45040-8058



Please return this slip with payment. Write account number on front of check. You can pay at any Macy's store, online at macys.com/credit, or by mail.

Payments received by mail by 5:00 pm local time at the address shown below will be credited as of the date received.

Use reverse side for address changes.

Account Number: [REDACTED] 4199

Payment Due Date February 8, 2019
New Balance \$160.02
Minimum Payment Due \$27.00

Amount Enclosed: \$

Make Check Payable to: Macy's
▼ Mail to address below ▼

Your Statement Enclosed

JF00800083 2 AV 0.378 MU226261 TMN 003367 4457



ALECIA A KREMIDAS

Macy's
PO BOX 9001094

LOUISVILLE KY 40298-1094
RESP'T APP 2375

ER 001248

07001 0002700 0016002 0000732 06035340541134199 0610

706674

02160663
LOB 204 MSP 3727



Macy's account transactions (cont.)

Transaction Date	Description	Location	Amount
Dec 29	- MERCHANDISE	TUCSON MALL	\$14.98
	- MERCHANDISE		\$5.99
	- MERCHANDISE		\$19.97
	- MERCHANDISE		\$39.99
	- MERCHANDISE		\$39.98
	SALES TAX		\$10.52
	RECEIPT TOTAL		\$131.43
Dec 29	JENNI COLLECTIONS - TOPS	TUCSON MALL	\$8.13
	JENNI COLLECTIONS - HOODIES		\$27.37
	SALES TAX		\$3.09
	OTHER PAY TYPE		-\$10.00
	RECEIPT TOTAL		\$28.59

Fees

Transaction Date	Description	Amount
	TOTAL FEES FOR THIS PERIOD	\$0.00

Interest Charged

Transaction Date	Description	Amount
	TOTAL INTEREST FOR THIS PERIOD	\$0.00

2019 Totals Year-to-Date

Total Fees Charged in 2019	\$0.00
Total Interest Charged in 2019	\$0.00

Activity and Promotions Detail

Original Promotion Trans Amount	Promotion Trans Date	Previous Balance	Payments & Other Credits	Purchases, Cash Adv, Fees & Other Debits	Interest Charged	New Balance	Promotion Minimum Payment Due	Deferred Interest Charges	Promotion Expiration Date
MACY'S ACCOUNT TRANSACTIONS REGULAR									
-	-	\$7.32	-\$7.32	\$160.02	-	\$160.02	-	-	-
TOTAL		\$7.32	-\$7.32	\$160.02	\$0.00	\$160.02	\$0.00	\$0.00	

Interest Charge Calculation

Type of Balance	Your Annual Percentage Rate (APR) is the annual interest rate on your account.		
	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
MACY'S ACCOUNT TRANSACTIONS REGULAR	27.49% (V)	\$0.00	\$0.00
(V) = Variable Rate			

RESP'T APP 2376

ER 001249



Fees

Transaction Date	Description	Amount
	TOTAL FEES FOR THIS PERIOD	\$0.00

Interest Charged

Transaction Date	Description	Amount
Dec 12	INTEREST CHARGE ON PURCHASES	\$7.32
	TOTAL INTEREST FOR THIS PERIOD	\$7.32

2018 Totals Year-to-Date

Total Fees Charged in 2018	\$0.00
Total Interest Charged in 2018	\$142.83

Activity and Promotions Detail

Original Promotion Trans Amount	Promotion Trans Date	Previous Balance	Payments & Other Credits	Purchases, Cash Adv, Fees & Other Debits	Interest Charged	New Balance	Promotion Minimum Payment Due	Deferred Interest Charges	Promotion Expiration Date
MACY'S ACCOUNT TRANSACTIONS REGULAR									
-	-	\$688.97	-\$688.97	-	\$7.32	\$7.32	-	-	-
TOTAL		\$688.97	-\$688.97	\$0.00	\$7.32	\$7.32	\$0.00	\$0.00	

Interest Charge Calculation

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

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
MACY'S ACCOUNT TRANSACTIONS REGULAR	27.24% (V)	\$316.65	\$7.32
(V) = Variable Rate			

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AL'S FAMILY FARMS EXCLUSIVE OFFER!

Macy's Cardholders get **FREE SHIPPING** on an 18 lb. Deluxe Mega-Tray of Florida's Indian River Citrus. Choose **All Navels, Red Grapefruit or Navels & Grapefruit Mixed**. Regular Price: \$64.90. Special Introductory Price: **\$44.95 Delivered**.

Also includes a 3 oz. jar of Orange Blossom Honey, Strawberry Bon Bon Candies and 2 Chocolate-Covered Coconut Patties. Offer Ends 01/15/2019. Limit 2 per customer.

To order call: 1-866-663-3310 or visit AlsFamilyFarms.com/FREED8 Use Promo Code: **FREED8**.

Al's Family Farms is solely responsible for this offer and these products.

HELP MAKE A CHILD'S WISH COME TRUE!

Write your letter to Santa at Macy's and you're helping Make-A-Wish® give children the strength they need to fight a critical illness. Drop your letter in the big red letterbox, or send it online at macys.com/believe and we'll donate \$1 to Make-A-Wish, up to \$1 million. #MacysBelieve

RESPT APP 2378

PLS06

Macy's Account statement



Questions or lost/stolen card? Call Customer Service 1-866-593-2543



Go to macys.com/credit to manage and pay your account online.

ALECIA A KREMIDAS

Account Number: [REDACTED] 4199

Summary of Account Activity

Previous Balance	\$772.47
Payments	-\$100.00
Other Credits	-\$0.00
Purchases/Other Debits	+\$0.00
Fees Charged	+\$0.00
Interest Charged	+\$16.50
New Balance	\$688.97
Past Due Amount	\$0.00

Credit Limit	\$1,000.00
Available Credit	\$311.00
Statement Closing Date	11/11/2018
Next Statement Closing Date	12/12/2018
Days in Billing Cycle	30

Payment Information

New Balance	\$688.97
Minimum Payment Due	\$27.00
Payment Due Date	December 8, 2018

Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee up to \$38.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Only the minimum payment	3 years	\$1,041

If you would like information about credit counseling services, call 1-877-337-8187.

For phone payments, you authorize Department Stores National Bank to **electronically debit your specified bank account by an ACH transaction** in the amount and on such date that you indicate on the phone. You may cancel a phone payment by calling us at the Customer Service number at the top of page 1 within the timeframe disclosed to you on the phone.

Macy's account transactions

Transaction Date	Description	Location	Amount
Oct 30	PAYMENT - THANK YOU		-\$100.00



PLEASE SEE IMPORTANT INFORMATION ON REVERSE SIDE.

Page 1 of 4

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P.O. BOX 8058
MASON, OH 45040-8058



Please return this slip with payment. Write account number on front of check. You can pay at any Macy's store, online at macys.com/credit, or by mail.

Payments received by mail by 5:00 pm local time at the address shown below will be credited as of the date received.

Use reverse side for address changes.

Account Number: [REDACTED] 4199

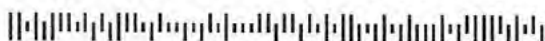
Payment Due Date	December 8, 2018
New Balance	\$688.97
Minimum Payment Due	\$27.00

Amount Enclosed: \$

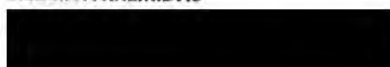
Make Check Payable to: Macy's
▼ Mail to address below ▼

Your Statement Enclosed

0L00920157 1 AV 0.378 ZA219742 TMN 006761 4354



ALECIA A KREMIDAS



Macy's
PO BOX 9001094

RESIT APP 2379



ER 001252

07001 0002700 006AA97 001.00000 0L035340561.1361.99 01 11

TOP LEFT

02812717
LOB 204 MSP 5774



Fees

Transaction Date	Description	Amount
	TOTAL FEES FOR THIS PERIOD	\$0.00

Interest Charged

Transaction Date	Description	Amount
Nov 11	INTEREST CHARGE ON PURCHASES	\$16.50
	TOTAL INTEREST FOR THIS PERIOD	\$16.50

2018 Totals Year-to-Date

Total Fees Charged in 2018	\$0.00
Total Interest Charged in 2018	\$135.51

Activity and Promotions Detail

Original Promotion Trans Amount	Promotion Trans Date	Previous Balance	Payments & Other Credits	Purchases, Cash Adv, Fees & Other Debits	Interest Charged	New Balance	Promotion Minimum Payment Due	Deferred Interest Charges	Promotion Expiration Date
MACY'S ACCOUNT TRANSACTIONS									
REGULAR									
-	-	\$772.47	-\$100.00	-	\$16.50	\$688.97	-	-	-
TOTAL		\$772.47	-\$100.00	\$0.00	\$16.50	\$688.97	\$0.00	\$0.00	

Interest Charge Calculation

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Interest Charge
MACY'S ACCOUNT TRANSACTIONS			
REGULAR	27.24% (V)	\$737.35	\$16.50
(V) = Variable Rate			

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

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AL'S FAMILY FARMS EXCLUSIVE OFFER!

Macy's Cardholders get FREE SHIPPING on an 18 lb. Deluxe Mega-Tray of Florida's Indian River Citrus. Choose from either All Navels, Red Grapefruit or Navels & Grapefruit Mixed. Regular Price: \$64.90 Special Introductory Price: \$44.95 Delivered. Also includes a 3 oz. jar of Orange Blossom Honey, Strawberry Bon Bon Candies and 2 Chocolate-Covered Coconut Patties. Offer Ends 12.15.2018. Limit 2 per customer. To order call: 1.866.663.3310 or visit AlsFamilyFarms.com/FREEN8 Use Promo Code: FREEN8.

MACY'S EXCLUSIVE! FREE SHIPPING
on your first 18 lb. Mega-Tray® of
Florida NAVEL Oranges!

Reg. Price \$64.90 **Introductory Price \$44.95** Delivered
Mega-Tray® #CNFL (All Navels)
Mega-Tray® #CNGFL (Navels & Ruby Reds)

Call Toll Free:
866.663.3310
or visit:
AlsFamilyFarms.com/MacysN8
Use Coupon Code: N8FREE

AL's Family Farms
Since 1971

Price includes standard delivery to the contiguous U.S.
Limit 2 per customer. Cannot be combined with other offers. Ends 12/15/18.
*The USDA requires citrus shipments to AZ, CA, LA and TX contain fruit only, no candies or honey.

PLUS... FREE
Orange Blossom Honey
(3 oz.), Candies, 2 Coconut
Patties included!

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If for any reason you're
not pleased, simply let us
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it right with your choice of either
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RESP'T APP 2380

*Offer expires 12/9/2018. Excludes tax and service fees.

P1F14

EXHIBIT 71

EXHIBIT 71

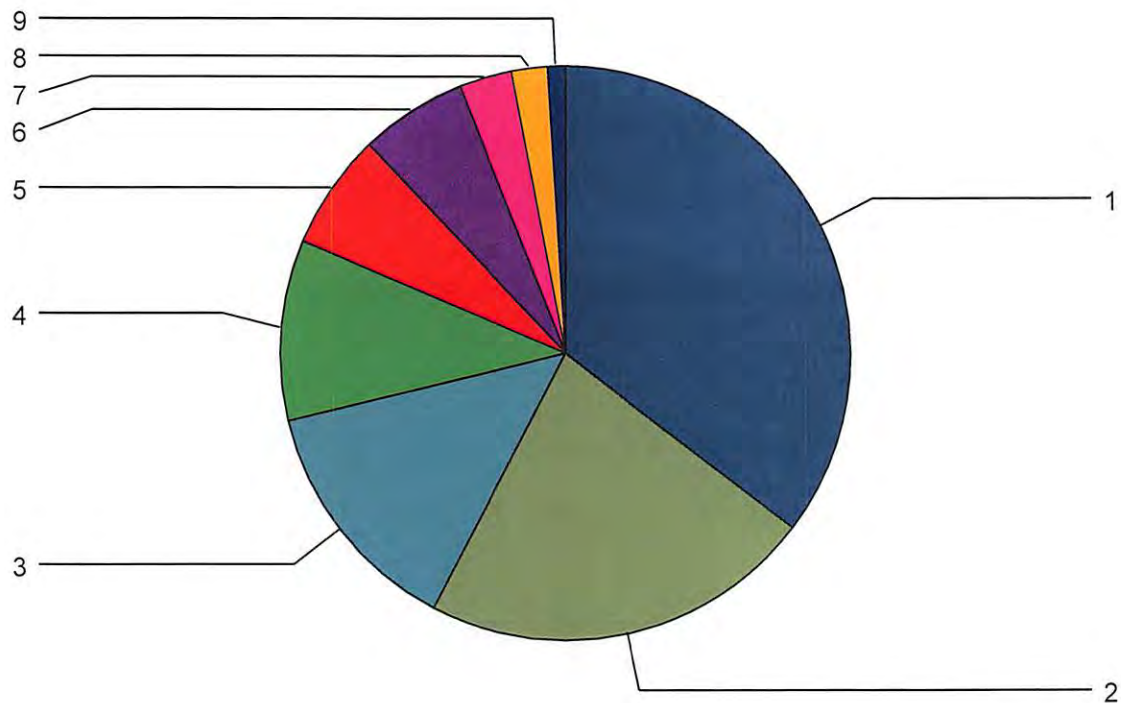
EXHIBIT 71
RESP'T APP 2381

2017 Annual Account Summary

Dates: 01/01/2017 - 12/31/2017

U.S. Bank Cash+ Visa Signature(R) Card

Account ending in 8121



1	Retail - General Merchandise	35%	\$4,107.63
2	Household Goods & Services	22%	\$2,597.50
3	Automotive Related	14%	\$1,579.51
4	Food and Drink	10%	\$1,179.22
5	Clothing and Personal Goods	7%	\$760.37
6	Services - Professional	6%	\$703.51
7	Computer Related	3%	\$348.04
8	Education, Government, and Related Services	2%	\$236.25
9	Other	1%	\$115.52

2017 Overview**Dates: 01/01/2017 - 12/31/2017**

Automotive Related

Automated Fuel Dispenser	\$124.62
Automotive Parts Accessories Stores	\$1,454.89

Subtotal Automotive Related	\$1,579.51
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Clothing and Personal Goods

Discount Stores	\$143.05
Men's And Boy's Clothing And Furnishings Store	\$466.21
Used Merchandise Stores Second Hand Stores	\$151.11

Subtotal Clothing and Personal Goods	\$760.37
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Computer Related

Computer And Data Processing Services	\$21.80
Electronic Sales	\$326.24

Subtotal Computer Related	\$348.04
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Education, Government, and Related Services

Government Services-Not Elsewhere Classified	\$236.25
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Subtotal Education, Government, and Related Services	\$236.25
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Entertainment, Amusement, and Recreation

Hobby Toy And Game Shops	\$115.52
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Subtotal Entertainment, Amusement, and Recreation	\$115.52
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Food and Drink

Caterers	\$2.00
Eating Places Restaurants	\$296.81
Fast Food Restaurants (Quick Pay Service Pilot)	\$34.01
Grocery Stores / Supermarkets	\$483.09
Misc Food Stores Specialty Markets Convenience	\$363.31

Subtotal Food and Drink	\$1,179.22
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Household Goods & Services

Furniture Home Furnish + Equip Excl Appliances	\$2,483.04
Home Supply Warehouse	\$6.72
Miscellaneous House Furnishing Specialty Shops	\$107.74

Subtotal Household Goods & Services	\$2,597.50
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Retail - General Merchandise

Book Stores	\$971.59
Direct Marketing-Catalog Merchants	\$697.19

2017 Overview**Dates: 01/01/2017 - 12/31/2017**

Retail - General Merchandise Continued

Miscellaneous And Specialty Retail Stores	\$413.40
Miscellaneous General Merchandise Stores	\$967.36
Sewing Needlework Fabric And Piece Goods Stores	\$119.71
Stationery Office And School Supply Stores	\$181.27
Wholesale Clubs	\$757.11
Subtotal Retail - General Merchandise	\$4,107.63

Services - Professional

Business Services-Not Elsewhere Classified	\$73.23
Commercial Photography Art Graphics	\$305.28
Insurance Sales Underwriting And Premiums	\$325.00
Subtotal Services - Professional	\$703.51

TOTAL	\$11,627.55
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2017 Annual Summary

Dates: 01/01/2017 - 12/31/2017

	January	February	March	Quarter 1
Purchases	NO DATA	NO DATA	NO DATA	\$0.00
Cash Advances	NO DATA	NO DATA	NO DATA	\$0.00
Adjustments	NO DATA	NO DATA	NO DATA	\$0.00
Miscellaneous	NO DATA	NO DATA	NO DATA	\$0.00
Fees	NO DATA	NO DATA	NO DATA	\$0.00
Payments	NO DATA	NO DATA	NO DATA	\$0.00
Credits/Returns	NO DATA	NO DATA	NO DATA	\$0.00
Total	NO DATA	NO DATA	NO DATA	\$0.00

	April	May	June	Quarter 2
Purchases	NO DATA	NO DATA	\$1,429.64	\$1,429.64
Cash Advances	NO DATA	NO DATA		
Adjustments	NO DATA	NO DATA		
Miscellaneous	NO DATA	NO DATA		
Fees	NO DATA	NO DATA		
Payments	NO DATA	NO DATA		
Credits/Returns	NO DATA	NO DATA	-\$652.49	-\$652.49
Total	NO DATA	NO DATA	\$777.15	\$777.15

2017 Annual Summary

Dates: 01/01/2017 - 12/31/2017

	July	August	September	Quarter 3
Purchases	\$2,608.98	\$885.36	\$1,719.54	\$5,213.88
Cash Advances				
Adjustments				
Miscellaneous				
Fees				
Payments	-\$390.79	-\$3,671.45	-\$1,263.16	-\$5,325.40
Credits/Returns	-\$92.35			-\$92.35
Total	\$2,125.84	-\$2,786.09	\$456.38	-\$203.87

	October	November	December	Quarter 4
Purchases	\$1,844.63	\$3,139.40		\$4,984.03
Cash Advances				
Adjustments		-\$204.31		-\$204.31
Miscellaneous				
Fees				
Payments	-\$965.56	-\$1,000.00	-\$2,947.79	-\$4,913.35
Credits/Returns	-\$113.41	-\$326.24		-\$439.65
Total	\$765.66	\$1,608.85	-\$2,947.79	-\$573.28

Annual Totals

Purchases	\$11,627.55
Cash Advances	\$0.00
Adjustments	-\$204.31
Miscellaneous	\$0.00
Fees	\$0.00
Payments	-\$10,238.75
Credits/Returns	-\$1,184.49
Balance	<u>\$0.00</u>

2017 in Detail

Dates: 01/01/2017 - 12/31/2017

Purchases

Automotive Related

Transaction Date	Post Date	Merchant	Amount
Automated Fuel Dispenser			
06/25/2017	06/26/2017	FOUNTAIN VALLEY FUEL	\$46.52
07/01/2017	07/03/2017	SHELL OIL 57444086201	\$38.10
07/07/2017	07/10/2017	76 - 76 PETROLINK IMPE	\$40.00
Subtotal			\$124.62

Automotive Parts Accessories Stores

09/09/2017	09/11/2017	PEPBOYS STORE 799	\$115.95
10/25/2017	10/27/2017	THEODORE ROBINS FORD P	\$1,338.94
Subtotal			\$1,454.89

Clothing and Personal Goods

Transaction Date	Post Date	Merchant	Amount
Discount Stores			
06/28/2017	06/29/2017	TARGET 00012930	\$88.80
07/01/2017	07/03/2017	TARGET 00002493	\$19.54
07/01/2017	07/03/2017	TARGET 00020511	\$34.71
Subtotal			\$143.05

Men's And Boy's Clothing And Furnishings Store

07/29/2017	07/31/2017	3 DAY SUIT BROKER	\$466.21
Subtotal			\$466.21

Used Merchandise Stores Second Hand Stores

06/26/2017	06/27/2017	WALLFLOWERS CONSIGNMEN	\$90.24
07/11/2017	07/13/2017	OC GOODWILL #1514	\$38.39
08/08/2017	08/09/2017	WALLFLOWERS CONSIGNMEN	\$10.51
08/08/2017	08/10/2017	OC GOODWILL #1514	\$11.97
Subtotal			\$151.11

Computer Related

Transaction Date	Post Date	Merchant	Amount
Computer And Data Processing Services			
08/01/2017	08/02/2017	VOYAGE MEDIA	\$21.80
Subtotal			\$21.80

Electronic Sales

11/27/2017	11/28/2017	BESTBUYCOM805513866370	\$326.24
Subtotal			\$326.24

2017 in Detail**Dates: 01/01/2017 - 12/31/2017****Education, Government, and Related Services**

Transaction Date	Post Date	Merchant	Amount
Government Services-Not Elsewhere Classified			
07/27/2017	07/28/2017	CITY OF ORANGE-BUSLICW	\$82.00
07/27/2017	07/28/2017	CITY OF HB BUSINESS LI	\$134.25
07/27/2017	07/28/2017	CA SECRETARY OF STATE	\$20.00
Subtotal			\$236.25

Entertainment, Amusement, and Recreation

Transaction Date	Post Date	Merchant	Amount
Hobby Toy And Game Shops			
07/28/2017	07/31/2017	HOBBY-LOBBY #512	\$115.52
Subtotal			\$115.52

Food and Drink

Transaction Date	Post Date	Merchant	Amount
Caterers			
07/29/2017	07/31/2017	SQ *MOONWOOD COFFEE CO	\$2.00
Subtotal			\$2.00

Eating Places Restaurants

07/03/2017	07/05/2017	MIMIS CAFE 18	\$29.64
07/26/2017	07/27/2017	SQ *BODHI LEAF CAFE	\$9.75
07/26/2017	07/27/2017	SQ *LOLLICUP DIAMOND J	\$7.50
09/19/2017	09/21/2017	APPLEBEES FOUN15215189	\$39.93
11/24/2017	11/27/2017	TONY ROMAS UNIVERSAL	\$209.99
Subtotal			\$296.81

Fast Food Restaurants (Quick Pay Service Pilot)

06/27/2017	06/29/2017	HABIT - IRVINE 2 #79	\$19.33
07/01/2017	07/03/2017	THE NIGHT OWL COFF	\$5.18
07/26/2017	07/27/2017	SQ *KONA LOA COFFEE DJ	\$9.50
Subtotal			\$34.01

Grocery Stores / Supermarkets

06/23/2017	06/26/2017	SPROUTS FARMERS MAR	\$20.00
06/23/2017	06/26/2017	SMARTNFINAL42310504231	\$110.46
06/24/2017	06/26/2017	SMARTNFINAL42310504231	\$36.98
06/25/2017	06/26/2017	SMARTNFINAL42310504231	\$30.97
07/07/2017	07/10/2017	SMARTNFINAL42310504231	\$27.72
07/07/2017	07/10/2017	SMART AND FINA10507887	\$28.95
07/29/2017	07/31/2017	MOTHERS MARKET & KI	\$14.99
08/07/2017	08/08/2017	SMARTNFINAL42310504231	\$25.97

2017 in Detail**Dates: 01/01/2017 - 12/31/2017**

Transaction Date	Post Date	Merchant	Amount
Grocery Stores / Supermarkets Continued			
09/09/2017	09/11/2017	SMARTNFINAL42310504231	\$151.31
10/04/2017	10/05/2017	SMARTNFINAL42310504231	\$23.35
11/29/2017	11/30/2017	WAL-MART #5930	\$12.39
Subtotal			\$483.09

Misc Food Stores Specialty Markets Convenience			
07/28/2017	07/31/2017	BODHI LEAF	\$60.16
08/07/2017	08/08/2017	BODHI LEAF	\$79.75
08/25/2017	08/28/2017	BODHI LEAF	\$116.90
10/03/2017	10/04/2017	BODHI LEAF	\$106.50
Subtotal			\$363.31

Household Goods & Services

Transaction Date	Post Date	Merchant	Amount
Furniture Home Furnish + Equip Excl Appliances			
11/07/2017	11/09/2017	LIVING SPACES FURNITUR	\$2,483.04
Subtotal			\$2,483.04

Home Supply Warehouse			
06/28/2017	06/29/2017	ORCHARD SUPPLY #331	\$6.72
Subtotal			\$6.72

Miscellaneous House Furnishing Specialty Shops			
11/15/2017	11/16/2017	BED BATH & BEYOND #651	\$107.74
Subtotal			\$107.74

Retail - General Merchandise

Transaction Date	Post Date	Merchant	Amount
Book Stores			
07/17/2017	07/18/2017	Amazon.com	\$118.47
09/27/2017	09/28/2017	AMAZON MKTPLACE PMTS	\$12.99
09/27/2017	09/28/2017	AMAZON MKTPLACE PMTS	\$79.90
09/27/2017	09/28/2017	AMAZON MKTPLACE PMTS	\$384.39
09/29/2017	10/02/2017	AMAZON MKTPLACE PMTS	\$82.68
09/29/2017	10/02/2017	AMAZON MKTPLACE PMTS	\$43.97
09/29/2017	10/02/2017	AMAZON MKTPLACE PMTS	\$39.90
10/02/2017	10/02/2017	AMAZON MKTPLACE PMTS	\$15.07
10/02/2017	10/03/2017	AMAZON MKTPLACE PMTS	\$39.95
10/03/2017	10/04/2017	AMAZON MKTPLACE PMTS	\$101.88
10/04/2017	10/04/2017	AMAZON MKTPLACE PMTS	\$7.43
10/05/2017	10/06/2017	AMAZON MKTPLACE PMTS	\$44.96
Subtotal			\$971.59

Direct Marketing-Catalog Merchants			
07/15/2017	07/17/2017	ULINE *SHIP SUPPLIES	\$239.59

2017 in Detail

Dates: 01/01/2017 - 12/31/2017

Transaction Date	Post Date	Merchant	Amount
Direct Marketing-Catalog Merchants Continued			
08/03/2017	08/03/2017	ULINE *SHIP SUPPLIES	\$457.60
Subtotal			\$697.19
Miscellaneous And Specialty Retail Stores			
07/03/2017	07/05/2017	ECARD SYSTEMS	\$177.46
07/07/2017	07/10/2017	PARTY CITY	\$63.39
07/07/2017	07/10/2017	PARTY CITY	\$15.06
08/04/2017	08/07/2017	CONTAINERSTORECOSTAMES	\$92.90
08/08/2017	08/10/2017	PIER 1 IMPORTS00016345	\$64.59
Subtotal			\$413.40
Miscellaneous General Merchandise Stores			
07/01/2017	07/03/2017	COST PLUS WLD #270	\$32.29
09/16/2017	09/18/2017	PBFY PACKAGING	\$210.00
09/22/2017	09/25/2017	PBFY PACKAGING	\$629.07
09/25/2017	09/27/2017	PBFY PACKAGING	\$96.00
Subtotal			\$967.36
Sewing Needlework Fabric And Piece Goods Stores			
06/23/2017	06/26/2017	JOANN FABRIC #1447	\$25.54
06/25/2017	06/26/2017	JOANN FABRIC #1447	\$15.70
07/27/2017	07/28/2017	JOANN FABRIC #1447	\$5.61
07/28/2017	07/31/2017	JOANN FABRIC #1447	\$61.20
07/28/2017	07/31/2017	JOANN FABRIC #1158	\$8.29
08/06/2017	08/07/2017	JOANN FABRIC #1447	\$3.37
Subtotal			\$119.71
Stationery Office And School Supply Stores			
06/26/2017	06/28/2017	STAPLES 00113027	\$107.74
06/27/2017	06/29/2017	STAPLES 00113506	\$73.53
Subtotal			\$181.27
Wholesale Clubs			
06/23/2017	06/26/2017	COSTCO WHSE #0411	\$757.11
Subtotal			\$757.11
Services - Professional			
Transaction Date	Post Date	Merchant	Amount
Business Services-Not Elsewhere Classified			
07/17/2017	07/18/2017	THE UPS STORE 4415	\$73.23
Subtotal			\$73.23
Commercial Photography Art Graphics			
07/07/2017	07/10/2017	WRAP ONE	\$305.28
Subtotal			\$305.28

2017 in Detail

Dates: 01/01/2017 - 12/31/2017

Insurance Sales Underwriting And Premiums

07/24/2017	07/25/2017	STATE FARM INSURANCE	\$325.00
Subtotal			\$325.00

Total Purchases	\$11,627.55
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Returns**Computer Related**

Transaction Date	Post Date	Merchant	Amount
Electronic Sales			
11/27/2017	11/28/2017	BEST BUY 00001115	-\$326.24
Subtotal			-\$326.24

Retail - General Merchandise

Transaction Date	Post Date	Merchant	Amount
Book Stores			
10/19/2017	10/20/2017	AMAZON MKTPLACE PMTS	-\$113.41
Subtotal			-\$113.41

Miscellaneous General Merchandise Stores

07/17/2017	07/19/2017	COST PLUS WLD #270	-\$32.29
Subtotal			-\$32.29

Sewing Needlework Fabric And Piece Goods Stores

07/28/2017	07/31/2017	JOANN FABRIC #1447	-\$4.82
07/28/2017	07/31/2017	JOANN FABRIC #1447	-\$46.16
07/28/2017	07/31/2017	JOANN FABRIC #1447	-\$0.79
07/28/2017	07/31/2017	JOANN FABRIC #1447	-\$8.29
Subtotal			-\$60.06

Wholesale Clubs

06/23/2017	06/26/2017	COSTCO WHSE #0411	-\$652.49
Subtotal			-\$652.49

Total Returns	-\$1,184.49
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2017 in Detail**Dates: 01/01/2017 - 12/31/2017****Adjustments****ADJUSTMENT**

Transaction Date	Post Date	Merchant	Amount
CREDIT ADJUSTMENT			
11/29/2017	11/29/2017	CASH REWARDS STATEMENT	-\$204.31
Subtotal			-\$204.31
Total Adjustments			-\$204.31

Payments**PAYMENT**

Transaction Date	Post Date	Merchant	Amount
PAYMENTS			
07/10/2017	07/10/2017	PAYMENT	-\$390.79
08/01/2017	08/01/2017	PAYMENT	-\$1,966.07
08/21/2017	08/21/2017	PAYMENT	-\$1,705.38
09/05/2017	09/05/2017	PAYMENT	-\$116.90
09/29/2017	09/29/2017	PAYMENT	-\$1,146.26
10/23/2017	10/23/2017	PAYMENT	-\$965.56
11/15/2017	11/15/2017	CREDIT CARD PAYMENT	-\$1,000.00
12/07/2017	12/07/2017	CREDIT CARD PAYMENT	-\$1,500.00
12/25/2017	12/26/2017	PAYMENT	-\$1,447.79
Subtotal			-\$10,238.75
Total Payments			-\$10,238.75

EXHIBIT 72

EXHIBIT 72

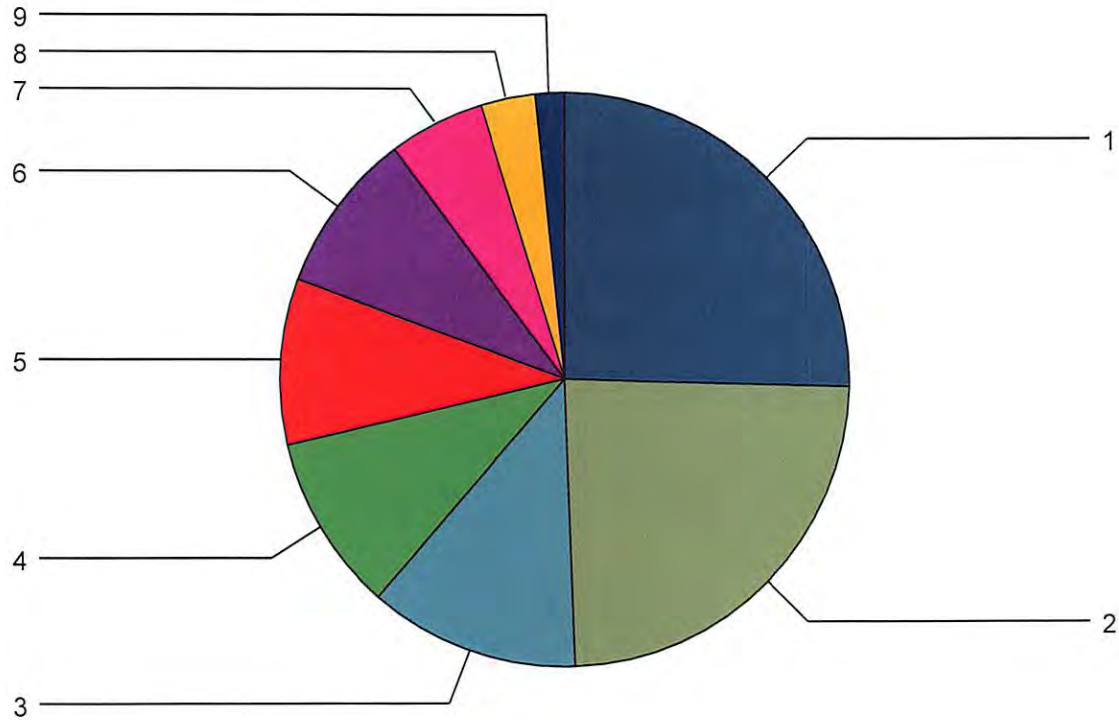
EXHIBIT 72
RESP'T APP 2394

2018 Annual Account Summary

Dates: 01/01/2018 - 12/31/2018

U.S. Bank Cash+ Visa Signature(R) Card

Account ending in 8121



1	Healthcare Services & Supplies	25%	\$660.00
2	Durable Goods	24%	\$625.20
3	Retail - General Merchandise	12%	\$311.00
4	Entertainment, Amusement, and Recreation	10%	\$257.69
5	Services - Personal	9%	\$243.00
6	Clothing and Personal Goods	9%	\$238.00
7	Food and Drink	5%	\$141.08
8	Household Goods & Services	3%	\$80.75
9	Other	2%	\$42.87

2018 Overview**Dates: 01/01/2018 - 12/31/2018**

Automotive Related

Automotive Service Shops \$20.00

Subtotal Automotive Related \$20.00

Clothing and Personal Goods

Family Clothing Stores \$238.00

Subtotal Clothing and Personal Goods \$238.00

Durable Goods

Office And Commercial Furniture \$625.20

Subtotal Durable Goods \$625.20

Entertainment, Amusement, and Recreation

Sporting Goods Stores \$257.69

Subtotal Entertainment, Amusement, and Recreation \$257.69

FEE

INTEREST \$22.87

Subtotal FEE \$22.87

Food and Drink

Candy Nut Confectionery Stores \$4.72

Eating Places Restaurants \$75.61

Fast Food Restaurants (Quick Pay Service Pilot) \$20.66

Misc Food Stores Specialty Markets Convenience \$40.09

Subtotal Food and Drink \$141.08

Healthcare Services & Supplies

Doctors (Not Elsewhere Classified) \$660.00

Subtotal Healthcare Services & Supplies \$660.00

Household Goods & Services

Home Supply Warehouse \$80.75

Subtotal Household Goods & Services \$80.75

Retail - General Merchandise

Book Stores \$157.21

2018 Overview**Dates: 01/01/2018 - 12/31/2018**

Retail - General Merchandise Continued

Wholesale Clubs	\$153.79
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Subtotal Retail - General Merchandise	\$311.00
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Services - Personal

Other Services (Not Elsewhere Classified)	\$243.00
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Subtotal Services - Personal	\$243.00
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TOTAL	\$2,599.59
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2018 Annual Summary

Dates: 01/01/2018 - 12/31/2018

	January	February	March	Quarter 1
Purchases	NO DATA	NO DATA	NO DATA	\$0.00
Cash Advances	NO DATA	NO DATA	NO DATA	\$0.00
Adjustments	NO DATA	NO DATA	NO DATA	\$0.00
Miscellaneous	NO DATA	NO DATA	NO DATA	\$0.00
Fees	NO DATA	NO DATA	NO DATA	\$0.00
Payments	NO DATA	NO DATA	NO DATA	\$0.00
Credits/Returns	NO DATA	NO DATA	NO DATA	\$0.00
Total	NO DATA	NO DATA	NO DATA	\$0.00

	April	May	June	Quarter 2
Purchases	NO DATA	\$625.20	\$978.75	\$1,603.95
Cash Advances	NO DATA			
Adjustments	NO DATA			
Miscellaneous	NO DATA			
Fees	NO DATA			
Payments	NO DATA		-\$300.00	-\$300.00
Credits/Returns	NO DATA		-\$18.31	-\$18.31
Total	NO DATA	\$625.20	\$660.44	\$1,285.64

2018 Annual Summary

Dates: 01/01/2018 - 12/31/2018

	July	August	September	Quarter 3
Purchases	\$96.27	\$284.60	\$157.21	\$538.08
Cash Advances				
Adjustments				
Miscellaneous				
Fees				
Payments	-\$100.00		-\$100.00	-\$200.00
Credits/Returns				
Total	-\$3.73	\$284.60	\$57.21	\$338.08

	October	November	December	Quarter 4
Purchases		\$434.69		\$434.69
Cash Advances				
Adjustments				
Miscellaneous				
Fees	\$22.87			\$22.87
Payments	-\$100.00	-\$1,546.59	-\$434.69	-\$2,081.28
Credits/Returns				
Total	-\$77.13	-\$1,111.90	-\$434.69	-\$1,623.72

Annual Totals

Purchases	\$2,576.72
Cash Advances	\$0.00
Adjustments	\$0.00
Miscellaneous	\$0.00
Fees	\$22.87
Payments	-\$2,581.28
Credits/Returns	-\$18.31
Balance	<u>\$0.00</u>