IN THE SUPREME COURT OF THE STATE OF NEVADA

HERMAN WILLIAMS, Appellant, vs. NADINE WILLIAMS, Respondent.	No.: 83263 **APPELLANT'S APPENDIX** **(Revised)** **Volume 7**

TABLE OF CONTENTS

Ravello Townhomes
4350 Cappas ST
Las Vegas, NV 89115-1637
702-342-0599

Dear Resident,

This letter is to advise as a result of the incident on March 6th 2020 on or about 3pm where a disturbance between resident Herman Williams residing at 4018 Adabella Ave, building 4 apartment 204 and Nadine Williams (a non residence) along with a Male friend of above named non resident visitor.

As a direct result of this disturbance we are no longer extending the invitation to renew your lease.

If you have questions please call the office referenced above.

Best Wishes in your future endeavors.

Jennifer Delich

SED EXHIBIT

Receipt

NOV 12 2019

DFS Records

REQUEST FOR RECORDS
CHILD PROTECTIVE SERVICES (CPS)

(Instructions on back)

CLARK COUNTY NEVADA

DEPARTMENT OF FAMILY SERVICES CLARK COUNTY

A. REQUESTER INFORMATION *(Please print)*

NAME (Last, First, M.I.)	CASE RELATIONSHIP (Parent, attorney, guardian, etc.)
Williams, Herman G JR	Father

REQUESTER'S DATE OF BIRTH (if documents are about the requester)	REQUESTER'S HOME OR CELL PHONE NO.	REQUESTER'S WORK PHONE NO.
8/5/1969	702-325-8869	702 720 9501

REQUESTER'S MAILING ADDRESS	CITY	STATE	ZIP CODE
4045 Adabella Ave	Las Vegas	NV	89115

INVOLVED CHILD(REN)'S NAME (Last, First, M.I.)	OTHER SPELLINGS and/or AKA(s)	DATE OF BIRTH
Williams Abigail		10/27/04
Williams, Herman III		8/24/08
Williams Matthew		5/13/10
Williams Elisa		4/26/13
CHILD(REN)'S MOTHER'S NAME (Last, First, M.I.)	OTHER SPELLINGS and/or AKA(s)	DATE OF BIRTH
Williams Nadine A		11/21/82
CHILD(REN)'S FATHER'S NAME (Last, First, M.I.)	OTHER SPELLINGS and/or AKA(s)	DATE OF BIRTH
Williams Herman G Jr.		8/5/69

B. REQUEST FOR RECORDS FOR COURT HEARING *(Processing time: Minimum of seven (7) business days upon receipt of proper proof of hearing.)*

DATE OF HEARING: Dec. 16, 2019 DEPARTMENT: I COURT CASE NO.: D-19-586291-D

TYPE OF HEARING: Motion

Note: Proper proof of court hearing date and department, such as a copy of the Register of Actions or a copy of an official file-stamped document from the court, is required before processing of this request will begin. Process time is dependent upon the type, volume, and extent of records requested.

C. GENERAL REQUEST FOR RECORDS *(Processing time: Up to 10 days, or as of upcoming court hearing is indicated – See Section B)*

REQUESTED DOCUMENTS *(Be specific so your request can be processed as quickly as possible)*

For the attached Williams, Herman G JR 11-12-19

D. REQUEST FOR CASE CLOSURE SUMMARY *(Processing time: Up to 10 days, unless court hearing is indicated – See Section B)*

☒ I, am the parent/legal guardian of the Juvenile(s) listed below, and do hereby request a *Case Closure Summary*. I acknowledge that the *Summary* will consist of the type of allegation, disposition of the allegation, date(s) the investigation was opened and closed, and the name of the caseworker who investigated. I also acknowledge that if I am the legal guardian, I will be required to provide court documentation for verification.

Note: Open Child Protective Services investigations will not be reflected on a *Closed Case Summary*.

REASON FOR REQUEST *(Check applicable box)*

☒ Court hearing (complete Section B) ☐ Foster care licensing ☐ Employment matter

☐ Agency appeal of substantiated finding ☒ Custody/Divorce matter

☐ Other (specify): _____

E. RECORD DELIVERY TYPE - CHOOSE ONE ONLY *(Records will be mailed if neither box is checked)*

☐ Please mail me copies of the above records. ☐ Please email me copies of the above records

☒ Please contact me to arrange a time for me to pick up the above records. Email: _____

F. CERTIFICATION AND SIGNATURE

I certify that I am the person requesting information in the foregoing request and have attached documentation verifying my connection to the records. I also understand that all information I receive is confidential and shall not be further disclosed.

SIGNATURE OF PERSON REQUESTING INFORMATION	DATE SIGNED
[signature]	11/12/19

2019 NOV 12 P 2:52

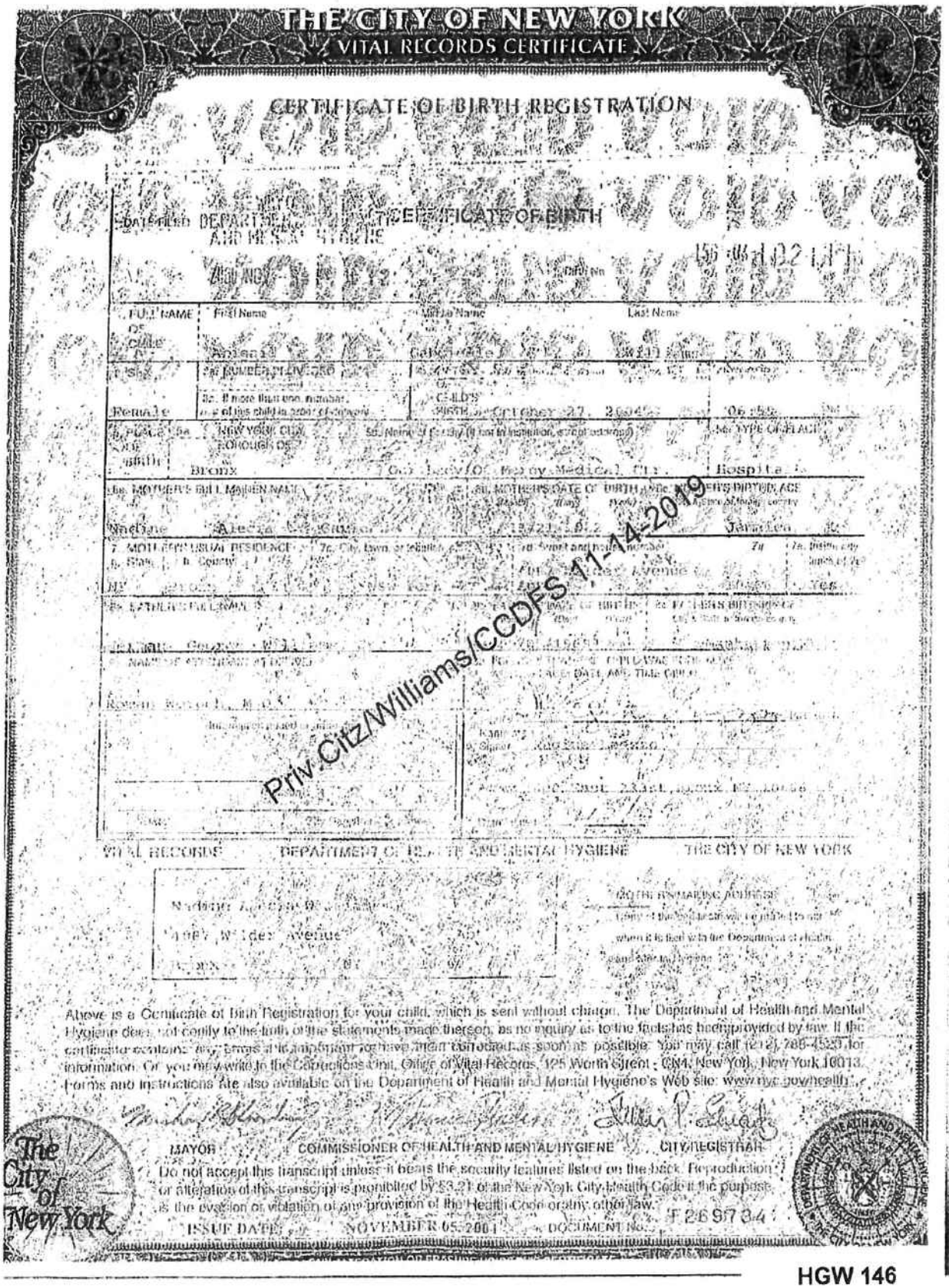
DEFENDANT'S EXHIBIT GGA D586291 11/12/19 291

PENGAD 800-631-6989

HGW 144

Priv. Ctz/Williams/CCDFS 11-14-2019

HGW 145



THE CITY OF NEW YORK
VITAL RECORDS CERTIFICATE

CERTIFICATE OF BIRTH REGISTRATION

CERTIFICATE OF BIRTH

Female

NEW YORK CITY
BOROUGH OF
Bronx

Hospital

Jamaica

Avenue

Priv.Citz/Williams/CCDFS 11-14-2019

VITAL RECORDS DEPARTMENT OF HEALTH AND MENTAL HYGIENE THE CITY OF NEW YORK

Above is a Certificate of Birth Registration for your child, which is sent without charge. The Department of Health and Mental Hygiene does not certify to the truth of the statements made thereon, as no inquiry as to the facts has been provided by law. If the certificate contains any errors, please advise them to us as soon as possible. You may call (212) 788-4520 for information. Or you may write to the Corrections Unit, Office of Vital Records, 125 Worth Street, CN4, New York, New York 10013. Forms and instructions are also available on the Department of Health and Mental Hygiene's Web site: www.nyc.gov/health

MAYOR COMMISSIONER OF HEALTH AND MENTAL HYGIENE CITY REGISTRAR

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ISSUE DATE: NOVEMBER 05, 2001 DOCUMENT No.: F 26 97 84

The City of New York

HGW 146

STATE OF CONNECTICUT

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF PUBLIC HEALTH

CERTIFICATE OF LIVE BIRTH

SCN: 2008-07-26676

CHILD'S NAME:
HERMAN GEORGE WILLIAMS III

SEX:
MALE

TIME OF BIRTH:
05:35 PM

DATE OF BIRTH:
AUGUST 24, 2008

WEIGHT:
7 LBS 4 OZS

BIRTHPLACE:
ST. VINCENT'S MEDICAL CENTER

CITY/TOWN:
BRIDGEPORT

COUNTY:
FAIRFIELD

MOTHER'S NAME:
NADINE ALECIA WILLIAMS

MAIDEN SURNAME:
GAYLE

MOTHER'S BIRTHPLACE:
JAMAICA

MOTHER'S DATE OF BIRTH:
NOVEMBER 21, 1982

MOTHER'S RESIDENCE:
245 DAYTON ROAD, BRIDGEPORT, CONNECTICUT 06606

FATHER'S NAME:
HERMAN GEORGE WILLIAMS JR.

FATHER'S BIRTHPLACE:
NEW YORK

FATHER'S DATE OF BIRTH:
AUGUST 25, 1969

CERTIFIER'S NAME:
DANIEL S GOTTSCHALL M.D.

DATE CERTIFIED:
AUGUST 24, 2008

ADDRESS:
4749 MAIN STREET, BRIDGEPORT, CONNECTICUT 06606

REGISTERED BY:
MARIAN EVANS

TITLE:
REGISTRAR

DATE REGISTERED:
AUGUST 29, 2008

CITY/TOWN:
BRIDGEPORT

I HEREBY CERTIFY THAT THIS IS A TRUE CERTIFICATE OF LIVE BIRTH ISSUED FROM THE OFFICIAL RECORDS ON FILE.

DATE ISSUED:
SEPTEMBER 10, 2008

PLACE OF ISSUANCE:
BRIDGEPORT

SIGNATURE OF ISSUING REGISTRAR: Patricia McCoy, Asst.

Priv. Stitz Williams/CCDHS 1-14-2019

HGW 147

0405372

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

THE CITY OF NEW YORK
VITAL RECORDS CERTIFICATE

CERTIFICATE OF BIRTH REGISTRATION

DATE FILED: MAY 18, 2010 01:42 PM

THE CITY OF NEW YORK – DEPARTMENT OF HEALTH AND MENTAL HYGIENE

CERTIFICATE OF BIRTH

CERTIFICATE NO. 156-10-043001

1. NAME OF CHILD (First, Middle, Last)	Matthew Christof Williams			
2. SEX: Male	3a. NUMBER DELIVERED (of this pregnancy)	4a. DATE OF CHILD'S BIRTH (Month / Day / Year - yyyy): May 23 2010	4b. Time: 02:39 PM	
5. PLACE OF BIRTH	5a. NEW YORK CITY BOROUGH: Bronx	5b. Name of Hospital or other facility (if not facility, street address): Montefiore Medical Center, North Division		
5c. TYPE OF PLACE	☒ Hospital ☐ Free-standing Birthing Center ☐ Clinic/Doctor's Office ☐ Home (Was baby born en route to hospital or home?) ☐ Yes ☐ No ☐ Unknown ☐ Other-specify			
6a. MOTHER/PARENT'S NAME (Prior to first marriage) (First, Middle, Last) SEX: M ☒ F	Nadine Alecia Gayle	6b. MOTHER/PARENT'S DATE OF BIRTH (Month / Day / Year - yyyy): 11 / 21 / 1982	6c. MOTHER/PARENT'S BIRTHPLACE (City & State or foreign country): Jamaica	
7. MOTHER/PARENT'S USUAL RESIDENCE (a. State: NY; b. County: Bronx)	7c. City or town: Bronx	7d. Street and number: 4155 Murdock Avenue	Apt. No.	ZIP Code: 10466
7e. Inside city limits of ...?	Yes ☒ No ☐			
8a. FATHER/PARENT'S NAME (First, Middle, Last) SEX: M ☒ F	Herman George Williams Jr.	8b. FATHER/PARENT'S DATE OF BIRTH (Month / Day / Year - yyyy): 08 / 06 / 1968	8c. FATHER/PARENT'S BIRTHPLACE (City & State or foreign country): New York, NY	
9a. NAME OF ATTENDANT AT DELIVERY	Rubina Khokhar	☐ M.D. ☐ D.O. ☐ Hosp. Admin ☐ C.N.M./C.M. ☐ Other-Specify ☐ Other Midwife ☐ R.N.		
9b. I CERTIFY THAT THIS CHILD WAS BORN ALIVE AT THE PLACE, DATE AND TIME GIVEN	Signed: Edna Vazquez (Signature Electronically Captured)	☐ M.D. ☐ D.O. ☐ Hosp. Admin ☐ C.N.M./C.M. ☐ Other-Specify ☐ Other Midwife ☐ R.N.		
	Name of Signer: Edna Vazquez (Type or Print)			
	Address: 600 E 233 Street Bronx, New York 10466			
	Date Signed: May 18 Year - yyyy: 2010			

Mother/Parent's Current (First, Middle, Last)

Legal Name: Nadine Alecia Williams

Address: 4155 Murdock Avenue Apt.

City: Bronx State: NY ZIP: 10466

No Correction History

For Office Use Only

Rev. 01/2009 Williams CODES 14

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MAYOR — COMMISSIONER OF HEALTH AND MENTAL HYGIENE — CITY REGISTRAR

The City of New York

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DATE ISSUED: May 26, 2010

G0003493 2

HGW 148

Recorded District: 5984

Register Number: 354

New York State Department of Health

CERTIFICATE OF LIVE BIRTH

State File Number: 131-2013-00035783

INFANT

1A. Name: First	Middle	Last
Elisha	Alexander	Williams

2A. Date of Birth:	2B. Hour:	3. Sex:	4A. Birth is:	4B. If Not Single, Birth is:
April 26, 2013	9:34 AM	Male	Single	

5. Place of Birth:	6A. Facility Name: (Address, if Place of Birth is Other than Hospital / Birthing Center)
Hospital	Sound Shore Medical Ctr of Westchester

6B. Locality of Birth:	6C. County of Birth:
City of New Rochelle	Westchester

MOTHER

7A-1. Name: First	Middle	Current Last Name
Nadine	Alecia	Williams

7A-2. Last Name on Birth Certificate:	7B. Date of Birth:	7C. City & State of Birth: (Country, if not U.S.A.)
Gayle	11/21/1982	Jamaica

8A. Residence, State: (Country, if not U.S.A.)	8B. County: (Terr. or Prov., if not U.S.A.)
New York	Bronx

8C. Locality:	8D. Inside City/Village Limit?
City of New York (Bronx)	Yes

8E. Street and Number of Residence:	8F. Zip Code:
4155 Murdock Ave	10466

8G. Mailing Address:	8H. Zip Code:
245 Dayton Rd , Bridgeport, CT	06606

FATHER

9A-1. Name: First	Middle	Current Last Name
Herman	George	Williams Jr,

9A-2. Last Name on Birth Certificate:	9B. Date of Birth:	9C. City & State of Birth: (Country, if not U.S.A.)
Williams	08/13/1969	New York, New York

ATTENDANT

10A. I certify that the stated information concerning this child is true to the best of my knowledge and belief.
Signature ▶ Dr. Christine Williams

10B. Date Signed: Month 4 Day 30 Year 2013

10C. Name of Certifier, if Not Attendant: Title:

10D-1. NYS License Number: (Certifier)

10E. Attendant's Name: RODRIGUEZ BARTHOLOME Title: M.D.

10F-1. NYS License Number: (Attendant) 159701

11A. Registrar Name: RITA A. COLANGELO

11B. Signature of the Registrar: ▶ Rita A. Colangelo - Deputy

11C. Date Filed: Month 05 Day 03 Year 2013

12. Information Added or Corrected:

Item No.	Date of Correction	Authorization	Original Information

Pursuant to CCDFS 11-14-2019

DOH-1963E (09/2009)

SAFEGUARD

HGW 149

[redacted] the mother "rules with an iron fist" and [redacted] there is neglect in the home because the children were left home alone one time, [redacted], however [redacted] the grandmother stepped in to ensure the children were not left home alone and unsupervised.

[redacted] mother is aggressive, controlling and vocal and more recently absent as she is "perusing her own agenda."

The mother does meet the children's basic needs of food clothing and shelter.

[redacted] the children listen to the father as they have respect for him. The father is [redacted] protective of the children as he transports the children to school and cares for them. [redacted]

6. What are the disciplinary practices in this family?

[redacted]

COMMENTS

Author: CATERINA, NAOMI
Title: SR FAMILY SERVICES SPEC
Date: 02-26-2019 at 6:05 PM
02/26/19 at 05:50PM [redacted] 19

Author: MINWEGEN-JOHANNESSOH, CRYSTALYN
Title: FAMILY SERVICES SPEC SUPV
Date: 02-26-2019 at 4:41 PM
[redacted]

Author: PENA, GABRIELA
Title: FAMILY SERVICES SPEC I
Date: 02-26-2019 at 3:31 PM
[redacted]

PRIMARY CARETAKER

ID: 2355080	Name: WILLIAMS, NADINE	DOB: [redacted]	Age Range: 36
SSN: [redacted]	Race:	Ethnicity: DECLINEDTOANSWR	Gender: F
Role: Parent	Temporary Person: N		
HOME Address: [redacted]			
GENERAL Phone: [redacted]			

OTHER PARTICIPANTS

ID	NAME	ROLE	GENDER	DOB	AGE RANGE	ETHNICITY
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
2355075	WILLIAMS, ABIGAIL	Child	F	[redacted]	14	DECLINEDTOANSWR
HOME Address: [redacted]						
Phone: [redacted]						
2355076	WILLIAMS, ELISHA	Child	M	[redacted]	5	DECLINEDTOANSWR
HOME Address: [redacted]						
Phone: [redacted]						
2355078	WILLIAMS, HERMAN	Parent	M	[redacted]	49	DECLINEDTOANSWR
HOME Address: [redacted]						
CELLULAR Phone: [redacted]						
GENERAL Phone: [redacted]						
CELLULAR Phone: [redacted]						
2355081	WILLIAMS, HERMAN	Child	M	[redacted]	10	DECLINEDTOANSWR
HOME Address: [redacted]						
CELLULAR Phone: [redacted]						
GENERAL Phone: [redacted]						
CELLULAR Phone: [redacted]						
2355079	WILLIAMS, MATHEW	Child	M	[redacted]	8	DECLINEDTOANSWR
HOME Address: [redacted]						
Phone: [redacted]						

PRESENT DANGER

No records exist

IMPENDING DANGER

No records exist

ALLEGATIONS

Received: 02-26-2019	Report: 1824971 - WILLIAMS, NADINE	INVS Update:
Perpetrator: 2355080 - WILLIAMS, NADINE	Victim: 2355075 - WILLIAMS, ABIGAIL	Finding: SUBSTANTIATED
Allegation: PHYSICAL INJRY ABUSENA BRUISE/SCUH		

TRACKING CHARACTERISTICS

TYPE	CHARACTERISTIC DESCRIPTION	FINDING
DOMESTICVIOLENC	DOMESTIC VIOLENCE	

HGW 151

FAMILY RELATIONSHIPS
[redacted]
[redacted]
[redacted]
[redacted]
WILLIAMS, ELISHA is the BROTHER to WILLIAMS, ABIGAIL
WILLIAMS, ELISHA is the BROTHER to WILLIAMS, MATHEW
WILLIAMS, ELISHA is the BROTHER to WILLIAMS, HERMAN
[redacted]
WILLIAMS, HERMAN is the FATHER to WILLIAMS, ABIGAIL
WILLIAMS, HERMAN is the FATHER to WILLIAMS, ELISHA
WILLIAMS, HERMAN is the FATHER to WILLIAMS, HERMAN
WILLIAMS, HERMAN is the FATHER to WILLIAMS, MATHEW
WILLIAMS, MATHEW is the BROTHER to WILLIAMS, ABIGAIL
WILLIAMS, MATHEW is the BROTHER to WILLIAMS, HERMAN
[redacted]
WILLIAMS, NADINE is the MOTHER to WILLIAMS, ABIGAIL
WILLIAMS, NADINE is the MOTHER to WILLIAMS, ELISHA
WILLIAMS, NADINE is the SPOUSE to WILLIAMS, HERMAN
WILLIAMS, NADINE is the MOTHER to WILLIAMS, MATHEW

CURRENT LEGAL STATUS
No records exist

PREVIOUS HISTORY OF REPORTS/INVESTIGATIONS/ASSESSMENTS
No records exist

CPS Referral Summary

REPORT INFORMATION		
Case ID: 1454556	Report Number: 1858329	Report Name: WILLIAMS, NADINE
Prior Reports in UNITY: Y	Disposition: INVESTIGATION	Response Time Type: PRI 2 W/IN 24HR
CPS Investigator: HOWARD, EVETTE	Assigned Date: 10-29-2019	Supervisor: COLLIER, TERRENCE
Investigation Closure Date:		Case Open for Services: YES

REFERRAL INFORMATION			
Referral ID: 1915415	Received Date: 10-28-2019	Received Time: 09:38 PM	Status: COMPLETED
Intake Worker: BELL, KATHRYN		Jurisdiction: CLARK	
Disposition: INVESTIGATION	Response Time Type: PRI 2 W/IN 24HR	Worker Safety Issues: N	Potential ICWA: N
Disposition and Response Time Explain: P-2 as impending danger is identified. The NM is violent and there is no protective adult in the home. NM has a substantiated prior case from February '19 in which she hit her child (Abigail) in the head with a PVC pipe, causing injury and a scar. NM engages in ongoing DV in the home. [redacted] NM possibly discharged a firearm with the children present. The previous case was closed with the understanding that NF would be protective and keep the children in his care. It is now reported the children are in NM's care.			
Current Location and Condition of Children: Abigail is currently at [redacted] Hotel in an unknown room # with her mother.			

EXPLORATORY

1. What is the extent of child maltreatment?

NM is violent and out of control. NF was supposed to be caring for the children and not allowing them to live with the NM. There are concerns for physical risk and inadequate supervision.

2. What are the circumstances surrounding the child maltreatment?

[redacted] mother, Nadine, picked up all 4 children last Thursday evening, and returned the 3 boys, Elisha, Mathew, and Herman Jr. to their father's home this morning before school. Nadine took Abigail directly to school and did not drop her off at her father, Herman's, home.

After school Abigail [redacted] walked to Nadine's home because it is across the street from the school. She did not return to Herman's home as she was supposed to.

Over the weekend, while the children were in Nadine's care, they stayed at the [redacted] Hotel. Herman Jr. reported Nadine has rented a room there until Wednesday; [redacted] Over the weekend, Nadine also rented another room attached to the one the family was in, so Abigail could have a party with her friends for her birthday. Herman Jr. reports one of the room numbers to be [redacted]

[redacted]

[redacted] Herman may contact police for a welfare check of Abigail at the [redacted] Hotel, and will contact Intake with the Event # if he chooses to contact police.

3. How do the children function on a daily basis?

Abigail (15) attends [redacted] High School. She has substance abuse issues with marijuana and wax [redacted] She is seeing a therapist due to her parents' divorce, and was [redacted] suicidal today. She has no cognitive issues.

[redacted]

4. How do the adults (primary caretakers) function on a daily basis?

Nadine is a Registered Nurse at a facility in Henderson; [redacted], she has been the aggressor in domestic violence in the home. She [redacted] has no substance abuse, mental health, medical or cognitive issues.

Herman is a self-employed tow truck driver. He has no mental health, substance abuse, medical or cognitive issues.

There is history of domestic violence between Nadine and Herman.

5. What are the general parenting practices in this family?

Herman is the primary custodial parent, and Nadine has court-ordered visitation with all 4 children every Saturday from 10 a.m.-6 p.m. with no overnight visits.

Herman is meeting the basic needs of the children.

6. What are the disciplinary practices in this family?

[redacted] Nadine uses physical discipline.

[redacted]

COMMENTS

Author: ROSE, MICHAEL, D.

Title: FAMILY SERVICES SPEC SUPV

Date: 10-28-2019 at 11:14 PM

On 02/27/19 a report was made to the Department with allegations of Physical Injury Abuse with bruises/cuts. The alleged victims listed in this report 14 yoa Abigail Williams, 12 yo Herman Jr Williams, 8 yo Mathew Williams and 5 yo Elisha Williams. The children lived in the home with their mother Nadine Williams, along with maternal grandmother [redacted] the mother dragged Abigail by her hair into her room and Abigail was [redacted] hit in the head with a pipe on her forehead which caused bleeding. The findings from the investigation [redacted] were substantiated as to physical abuse with injuries involving Abigail Williams by her mother. The worker interviewed Abigail and observed a scar in the center of her forehead [redacted]. The investigator noted [redacted]: There is clearly domestic violence issues in the home as reported by several family members and subsequently this agency received another report involving the boyfriend of Nadine Williams and similar allegations involving a gun and possible discharging a firearm while the children were present.

The case was closed with the understanding that the children would be in their father's care. The conclusion [redacted] states; The children [redacted] were afraid when in the home with their mother; however, the children moved out of the home with their father and maternal grandmother March of 2019. The children were seen in their new home with their father and [redacted] feel safe in the care of their father and maternal grandmother. The children [redacted] are having visits with their mother and [redacted] visits are going "okay".

Author: BELL, KATHRYN

Title: FAMILY SERVICES SPEC I

Date: 10-28-2019 at 10:33 PM

[redacted]

Phy. Cliz/Williams/CCDFS 11-14-2019

PRIMARY CARETAKER

ID: 2355080	Name: WILLIAMS, NADINE	DOB: [redacted]	Age Range: 36
SSN: [redacted]	Race:	Ethnicity: DECLINEDTOANSWR	Gender: F
Role: Parent	Temporary Person: N		
HOME Address: [redacted]			
GENERAL Phone: [redacted]			

HGW 155

OTHER PARTICIPANTS

ID	NAME	ROLE	GENDER	DOB	AGE RANGE	ETHNICITY
2355075	WILLIAMS, ABIGAIL	Child	F	[redacted]	15	DECLINEDTOANSWR
HOME Address: [redacted]						
Phone: [redacted]						
2355076	WILLIAMS, ELISHA	Child	M	[redacted]	6	DECLINEDTOANSWR
HOME Address: [redacted]						
Phone: [redacted]						
2355078	WILLIAMS, HERMAN	Parent	M	[redacted]	50	DECLINEDTOANSWR
HOME Address: [redacted]						
CELLULAR Phone: [redacted]						
GENERAL Phone: [redacted]						
CELLULAR Phone: [redacted]						
2355081	WILLIAMS, HERMAN	Child	M	[redacted]	11	DECLINEDTOANSWR
HOME Address: [redacted]						
CELLULAR Phone: [redacted]						
GENERAL Phone: [redacted]						
CELLULAR Phone: [redacted]						
2355079	WILLIAMS, MATHEW	Child	M	[redacted]	9	DECLINEDTOANSWR
HOME Address: [redacted]						
Phone: [redacted]						

PRESENT DANGER

No records exist

IMPENDING DANGER

A Parent or Caregiver is Violent and No Adult in the Home is Protective of the Child(ren).. One or Both Parents/Caregivers Cannot Control their Behavior.

The NM is violent and there is no protective adult in the home. NM has a substantiated prior case from February '19 in which she hit her child (Abigail) in the head with a PVC pipe, causing injury and a scar. NM engages in ongoing DV in the home. [redacted] NM possibly discharged a firearm with the children present. The previous case was closed with the understanding that NF would be protective and keep the children in his care. [redacted] the children are in NM's care.

Mutual Behavior Order EXECUTED and FILED IN OPEN COURT with a copy provided to the parties. 11. Dad is to list himself as the primary physical custodian with the children's schools and include that Mom is an emergency contact. Further, Dad may enroll the children in the schools zoned for his address, if he wishes to do so. 12. As the Court is not able to provide the parties with copies of the CPS records, they are to go to the Department of Family Services on Alta and Martin Luther King and request a copy of them. Dad shall prepare the Order from today's hearing. CLERK'S NOTE: A copy of this minute order was mailed to Dad at his address of record on 7/23/19. (ag);
Matter Heard

08/26/2019 **Return Hearing** (8:45 AM), (Judicial Officer: Moss, Cheryl B.)
FMC- Child Interviews

MINUTES
Matter Heard;
Journal Entry Details:
RETURN HEARING: FMC CHILD INTERVIEWS Parties sworn and testified. COURT NOTES the matter is sealed. COURT FURTHER NOTES the child interviews indicate that Mother physically disciplines the children. Discussion by the Parties. Attorney Toti represented Father is not cooperating with Donna Gosnell for reunification therapy between the children and Mother. The Department of Family Services (DFS) has closed their case with a substantiation of improper physical discipline on the children against Mother. Upon Court's inquiry, Attorney Toti represented that Mother will be appealing the decision from DFS and he will be representing her. Upon Court's further inquiry, Attorney Toti represented, it is his understanding there were no marks left on the children. Father stated he took the children to Therapist, Michael Gomez, using Medicaid rather than taking them to Donna Gosnell. Father accepted Mother's invite link through Appclose in open court. Upon Court's inquiry, Father stated the oldest child, Abigail, attends Desert Oasis High School. The child, Herman, attends Sedway Middle School. The youngest two (2) children attend Glenwood Elementary. COURT ORDERED the following: 1. Parties shall have JOINT LEGAL CUSTODY. 2. Mother shall have DAY VISITS on Saturdays from 10:00 a.m. until 6:00 p.m. 3. Parties may VIDEO RECORD each other in person. 4. Parties shall follow the DEPARTMENT I HOLIDAY SCHEDULE. 5. There shall be NO CORPORAL PUNISHMENT from both households. If the older child needs to be disciplined, Mother may take away the child's cell phone; however, if the child wants to talk or text her Father she can ask Mother for permission and the child shall be allowed to talk/text Father and return the cell phone to Mother until the grounding period is over. If Mother has to discipline the child, Father shall find out what happened and support Mother. 6. Donna Gosnell shall be the REUNIFICATION COUNSELOR and Father shall cooperate. If Father has any questions regarding the appointments, Father may speak to Donna Gosnell's office. Mother shall pre-pay without prejudice. If Father fails to cooperate with appointments, the Court will consider changing custody. 7. Both parents shall complete ABC of Parenting and Teen Triple P class through the Parenting Project. Father shall complete the ABC's of Parenting first and the Teen Triple P class second. Mother shall take the Teen Triple P first and the ABC's of Parenting second. 8. Parties shall complete the ON-LINE HIGH CONFLICT CLASS. Department I's Judicial Executive Assistant (JEA) shall e-mail the link to Attorney Toti and Father. 9. Parties shall complete the COPE CLASS. 10. Parties shall continue to communicate through APPCLOSE. Parties can upload medical bills to get half of the reimbursement from the other party. 11. Father may continue to use the 2015 CHEVY SILVERADO TRUCK. Mother's request to keep the truck is deferred to trial. 12. With regard to the GARAGE DOOR and MAILBOX KEY, Father shall place the two (2) items in a plastic bag and hand it to Mother at the next child exchange. Father may take a picture of himself handing over the plastic bag with the two (2) items. 13. Court shall monitor Mother's appeal to the Department of Family Services (DFS). 14. Mother shall take pictures of everything in the garage including anything behind the scaffold, the speaker box, and the transmission. Mother shall send the pictures through APPCLOSE and Father shall identify the items he wants. Mother shall designate a date for Father to pick-up the items and he shall have one (1) hour to take his belongings. Father shall work with Attorney Toti to coordinate the pick-up of his belongings. Mother may put the items in front of the garage for Father to pick-up. 15. CALENDAR CALL is SET for 1/22/20 at 9:00 a.m. to find out if the parties have taken the parenting classes or if custody needs to be changed. 16. Non-Jury Trial (Stack 1) set for 2/4/20 at 1:30 p.m. STANDS. Attorney Toti shall prepare the Order from today's hearing.;
Matter Heard

12/16/2019 **Motion** (9:00 AM) (Judicial Officer: Moss, Cheryl B.)
Defendant's Motion and Notice of Motion for an Order to Show Cause Regarding Contempt and to Enforce Child Custody and/or Visitation

12/16/2019 **Motion** (9:00 AM) (Judicial Officer: Moss, Cheryl B.)
Def's Motion and Notice of Motion for an Order to Enforce and/or for an Order to Show Cause Regarding Contempt

12/16/2019 **Motion** (9:00 AM) (Judicial Officer: Moss, Cheryl B.)
Defendant's Motion for an Order to Enforce and/or for an Order to Show Cause Regarding Contempt

HGW 157

CPS Referral Summary

REPORT INFORMATION		
Case ID: 1454556	Report Number: 1824971	Report Name: WILLIAMS, NADINE
Prior Reports in UNITY: N	Disposition: INVESTIGATION	Response Time Type: PRI 3 W/IN 72HR
CPS Investigator:	Assigned Date:	Supervisor:
Investigation Closure Date: 05-02-2019		Case Open for Services: YES

REFERRAL INFORMATION			
Referral ID: 1887662	Received Date: 02-26-2019	Received Time: 12:27 PM	Status: COMPLETED
Intake Worker: PENA, GABRIELA		Jurisdiction: CLARK	
Disposition: INVESTIGATION	Response Time Type: PRI 3 W/IN 72HR	Worker Safety Issues: N	Potential ICWA: N
Disposition and Response Time Explain: P3- [redacted] the mother has dragged Abigail by the hair into her room. [redacted] There was also another incident were the mother hit Abigail with a pipe on her forehead which caused bleeding. [redacted] Abigail did sustain an injury to a high risk area, her forehead.			
Current Location and Condition of Children: The mother Nadine, the father Herman, the grandmother [redacted] and the four children, Abigail (14), Elisha (5) Mathew (8), and Herman (12) reside at [redacted]			

ALLEGATIONS

Received: 10-28-2019 Perpetrator: 2355078 - WILLIAMS, HERMAN Allegation: PHYSCLINJRYNEGL/14N PHYS RISK	Report: 1858329 - WILLIAMS, NADINE Victim: 2355076 - WILLIAMS, ELISHA	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355080 - WILLIAMS, NADINE Allegation: PHYSCLINJRYNEGL/14N PHYS RISK	Report: 1858329 - WILLIAMS, NADINE Victim: 2355076 - WILLIAMS, ELISHA	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355078 - WILLIAMS, HERMAN Allegation: PHYSCLINJRYNEGL/14N PHYS RISK	Report: 1858329 - WILLIAMS, NADINE Victim: 2355079 - WILLIAMS, MATHEW	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355080 - WILLIAMS, NADINE Allegation: PHYSCLINJRYNEGL/14N PHYS RISK	Report: 1858329 - WILLIAMS, NADINE Victim: 2355079 - WILLIAMS, MATHEW	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355078 - WILLIAMS, HERMAN Allegation: PHYSCLINJRYNEGL/14N PHYS RISK	Report: 1858329 - WILLIAMS, NADINE Victim: 2355081 - WILLIAMS, HERMAN	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355080 - WILLIAMS, NADINE Allegation: PHYSCL INJRY NEGL/14N PHYS RISK	Report: 1858329 - WILLIAMS, NADINE Victim: 2355081 - WILLIAMS, HERMAN	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355078 - WILLIAMS, HERMAN Allegation: PHYSCLINJRYNEGL/14N PHYS RISK	Report: 1858329 - WILLIAMS, NADINE Victim: 2355075 - WILLIAMS, ABIGAIL	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355080 - WILLIAMS, NADINE Allegation: PHYSCLINJRYNEGL/14N PHYS RISK	Report: 1858329 - WILLIAMS, NADINE Victim: 2355075 - WILLIAMS, ABIGAIL	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355078 - WILLIAMS, HERMAN Allegation: NEGL TREATMENT/ISN INAD SUPER	Report: 1858329 - WILLIAMS, NADINE Victim: 2355076 - WILLIAMS, ELISHA	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355080 - WILLIAMS, NADINE Allegation: NEGL TREATMENT/ISN INAD SUPER	Report: 1858329 - WILLIAMS, NADINE Victim: 2355076 - WILLIAMS, ELISHA	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355078 - WILLIAMS, HERMAN Allegation: NEGL TREATMENT/ISN INAD SUPER	Report: 1858329 - WILLIAMS, NADINE Victim: 2355079 - WILLIAMS, MATHEW	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355080 - WILLIAMS, NADINE Allegation: NEGL TREATMENT/ISN INAD SUPER	Report: 1858329 - WILLIAMS, NADINE Victim: 2355079 - WILLIAMS, MATHEW	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355078 - WILLIAMS, HERMAN Allegation: NEGL TREATMENT/ISN INAD SUPER	Report: 1858329 - WILLIAMS, NADINE Victim: 2355081 - WILLIAMS, HERMAN	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355080 - WILLIAMS, NADINE Allegation: NEGL TREATMENT/ISN INAD SUPER	Report: 1858329 - WILLIAMS, NADINE Victim: 2355081 - WILLIAMS, HERMAN	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355078 - WILLIAMS, HERMAN Allegation: NEGL TREATMENT/ISN INAD SUPER	Report: 1858329 - WILLIAMS, NADINE Victim: 2355075 - WILLIAMS, ABIGAIL	INVS Update: Finding:
Received: 10-28-2019 Perpetrator: 2355080 - WILLIAMS, NADINE Allegation: NEGL TREATMENT/ISN INAD SUPER	Report: 1858329 - WILLIAMS, NADINE Victim: 2355075 - WILLIAMS, ABIGAIL	INVS Update: Finding:

TRACKING CHARACTERISTICS

TYPE	CHARACTERISTIC DESCRIPTION	FINDING
DOMESTICVIOLENC	DOMESTIC VIOLENCE	
MARIJUANA ABUSE	MARIJUANA ABUSE	
MH ISSUES	MENTAL HEALTH ISSUES	

HGW 159

FAMILY RELATIONSHIPS
[redacted]
[redacted]
[redacted]
[redacted]
WILLIAMS, ELISHA is the BROTHER to WILLIAMS, ABIGAIL
WILLIAMS, ELISHA is the BROTHER to WILLIAMS, MATHEW
WILLIAMS, ELISHA is the BROTHER to WILLIAMS, HERMAN
WILLIAMS, HERMAN is the FATHER to WILLIAMS, ABIGAIL
WILLIAMS, HERMAN is the FATHER to WILLIAMS, ELISHA
[redacted]
WILLIAMS, HERMAN is the FATHER to WILLIAMS, HERMAN
WILLIAMS, HERMAN is the FATHER to WILLIAMS, MATHEW
WILLIAMS, MATHEW is the BROTHER to WILLIAMS, ABIGAIL
WILLIAMS, MATHEW is the BROTHER to WILLIAMS, HERMAN
WILLIAMS, NADINE is the MOTHER to WILLIAMS, ABIGAIL
WILLIAMS, NADINE is the MOTHER to WILLIAMS, ELISHA
WILLIAMS, NADINE is the SPOUSE to WILLIAMS, HERMAN
WILLIAMS, NADINE is the MOTHER to WILLIAMS, MATHEW
[redacted]

CURRENT LEGAL STATUS
No records exist

PREVIOUS HISTORY OF REPORTS/INVESTIGATIONS/ASSESSMENTS		
Received: 02-26-2019	Report: [redacted] WILLIAMS, NADINE	INVS Update:
Perpetrator: 23550[illegible] - WILLIAMS, NADINE	Victim: [redacted] WILLIAMS, ABIGAIL	Finding: SUBSTANTIATED
Allegation: PHYSICAL INJRY ABUSE/NEGLIGENT/I		

UNITY Case Notes

Case: 1454556 - WILLIAMS, NADINE

Start Date: 02-28-2019
Stop Date: 02-28-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 12:00 PM
Stop Time: 01:30 PM
Contact Type: INPERSON-OTHER
Travel Time: 35 minutes

Note Type(s)
CHILDCONTACT

TCM Activity Type(s)
ASSESS NEEDS

Contact With
WILLIAMS, ELISHA
WILLIAMS, MATHEW
WILLIAMS, HERMAN

Contact About
[redacted]
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: GIPSON, KIMBERLY
Title: SR FAMILY SERVICES SPEC

On this date this worker interviewed Elisha, Herman and Mathew Williams at their school regarding the allegations in this report. Each child was interviewed with no other person present in the room.

Start Date: 03-01-2019
Stop Date: 03-01-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 02:00 PM
Stop Time: 03:50 PM
Contact Type: INPERSON-OTHER
Travel Time: 45 minutes

Note Type(s)
PARENT CONTACT

TCM Activity Type(s)
ASSESS NEEDS

Contact With
WILLIAMS, HERMAN

Contact About
[redacted]
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: GIPSON, KIMBERLY
Title: SR FAMILY SERVICES SPEC

HGW 161

On this date this worker spoke with Herman Williams and interviewed him regarding allegations in this report. Mr. Williams on this date is planning to move his children out of the home and mother in law. Mr. Williams provided this worker with copies of 2 TPO's he filed with the family court in an attempt to protect his children from their mother, however they were both denied. [redacted]

[redacted]

Start Date: 03-07-2019
Stop Date: 03-07-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 11:30 AM
Stop Time: 12:00 PM
Contact Type: INPERSON-OTHER
Travel Time: 45 minutes

Note Type(s)
CHILDCONTACT

TCM Activity Type(s)
ASSESS NEEDS

Contact With
WILLIAMS, ABIGAIL

Contact About
[redacted]
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: GIPSON, KIMBERLY
Title: SR FAMILY SERVICES SPEC

On this date this worker interviewed Abigail Williams at her school regarding this report. [redacted]

[redacted]

Start Date: 03-07-2019
Stop Date: 03-07-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 12:00 PM
Stop Time: 12:30 PM
Contact Type: INPERSON-OTHER
Travel Time: 45 minutes

Note Type(s)
CHILDCONTACT

TCM Activity Type(s)
ASSESS NEEDS

Contact With
WILLIAMS, ABIGAIL

Contact About
[redacted]
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: GIPSON, KIMBERLY
Title: SR FAMILY SERVICES SPEC

On this date this worker interviewed Abigail Williams at her school regarding the allegations in this report.

Start Date: 03-08-2019
Stop Date: 03-08-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 10:00 AM
Stop Time: 12:30 PM
Contact Type: INPERSON-OFFICE
Travel Time:

Note Type(s)
PARENT CONTACT

TCM Activity Type(s)
ASSESS NEEDS

Contact With
WILLIAMS, NADINE

Contact About
[redacted]
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: GIPSON, KIMBERLY
Title: SR FAMILY SERVICES SPEC

On this date this worker interviewed Nadine Williams at the DFS Central office regarding this report. Nadine was provide with an agency brochure and provided information related to the allegations in this report.

Start Date: 03-09-2019
Stop Date: 03-09-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 12:00 PM
Stop Time: 12:10 PM
Contact Type: OTHER
Travel Time:

Note Type(s)
7DAYSPRVSRRVW

TCM Activity Type(s)
NONE

Contact With

Contact About
[redacted]
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: COLLIER, TERRENCE
Title: FAMILY SERVICES SPEC SUPV

Abigail seen in person
Mother not yet seen
Father seen in person
Grandmother not yet seen
Concerns that the children are being hit by their mother with objects causing injuries to them. The father [redacted] is moving the children out of the home to ensure they are safe and has applied for TPO's however they have not been granted
Follow up with family and collaterals
[redacted]

Start Date: 03-19-2019
Stop Date: 03-19-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 03:30 PM
Stop Time: 03:40 PM
Contact Type: OTHER
Travel Time:

Note Type(s)
21DAYSPRVSRRVW

TCM Activity Type(s)
NONE

Contact With

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, NERMAN

Author: COLLIER, TERRENCE
Title: FAMILY SERVICES SPEC SUPV

Children seen in person
Mother seen in person
Father seen in person
Grandmother not yet seen
Concerns that the children are being hit by their mother with objects causing injuries to them. The father has moved out of the home with the children and plans to file another TPO on behalf of the children
Follow up with family and collaterals
[redacted]

Start Date: 04-16-2019
Stop Date: 04-16-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 02:30 PM
Stop Time: 03:00 PM
Contact Type: INPERSON-HOME
Travel Time: 45 minutes

Note Type(s)
CHILDCONTACT

TCM Activity Type(s)
ASSESS NEEDS

Contact With
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, MATHEW
WILLIAMS, HERMAN

Contact About
[redacted]
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: GIPSON, KIMBERLY
Title: SR FAMILY SERVICES SPEC

On this date this worker had in person contact with Abigail, Elisha, Herman Jr. and Mathew Williams at their father's home where the children [redacted] reside in the care of their father and maternal grandmother. The children [redacted] have visitation with their mother and visits are going "okay" [redacted] Children report no concerns of safety/ abuse or neglect while in the care of their father.

Start Date: 04-18-2019
Stop Date: 04-18-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 09:30 AM
Stop Time: 10:00 AM
Contact Type: PHONE
Travel Time:

Note Type(s)
PARENT CONTACT

TCM Activity Type(s)
NONE

Contact With
WILLIAMS, NADINE

Contact About
[redacted]
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: GIPSON, KIMBERLY
Title: SR FAMILY SERVICES SPEC

[redacted]

Start Date: 05-02-2019
Stop Date:
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 01:55 PM
Stop Time:
Contact Type: OTHER
Travel Time:

Note Type(s)
SPVSYCONTACT

Author: GIPSON, KIMBERLY
Title: SR FAMILY SERVICES SPEC

HGW 165

On February 26, 2019 a report was made to Child Protective Services with allegations of Physical Injury abuse with bruises cuts. The alleged victims listed in this report 14 yo Abigail Williams, 12 yo Herman Jr Williams, 8 yo Matthew Williams and 5 yo Elisha Williams, the children [redacted] lives in the home with their natural parents mother Nadine Williams and Herman Williams, along with maternal grandmother [redacted] the mother dragged Abigail by her hair into her room, [redacted] Abigail was [redacted] hit in the head with a pipe on her forehead which caused bleeding. The findings in this report are substantiated as to the allegations of physical abuse with injuries involving Abigail Williams by her mother. [redacted]

Start Date: 05-02-2019
Stop Date:
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 03:06 PM
Stop Time:
Contact Type: OTHER
Travel Time:

Note Type(s)
PRSNTDNGRASSESS

Author: COLLIER, TERRENCE
Title: FAMILY SERVICES SPEC SUPV

On February 28, 2019 this worker attempted contact with the parents at the address listed in this report however there was no answer on this date, this worker left a business card [redacted]. This worker was able to make contact with the younger children at school in this report. This worker interviewed regarding this report and allegations related to this report. The children all appear to have good attendance in school and no behavioral issues. Matthew Williams was interviewed at school no other person present during this contact. [redacted]

Herman William Jr was interviewed at school regarding this report. [redacted]

Elisha Williams is 5 years old and was interviewed alone at his school regarding this report. [redacted]

Start Date: 05-02-2019
Stop Date:
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 03:21 PM
Stop Time:
Contact Type: OTHER
Travel Time:

Note Type(s)
CLOSING SUMMARY

HGW 166

Contact With

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, MATHEW
WILLIAMS, HERMAN

Author: COLLIER, TERRENCE
Title: FAMILY SERVICES SPEC SUPV

[redacted]

Impending Dangers:

Child Conclusion:
WILLIAMS, ABIGAIL is Safe
WILLIAMS, ELISHA is Safe
WILLIAMS, MATHEW is Safe
WILLIAMS, HERMAN is Safe

[redacted] Summary:
The children have reported they were afraid when in the home with their mother, however the children moved out of the home with their father and maternal grandmother March of 2019. The children were seen in their new home with their father and report they feel safe in the care of their father and maternal grandmother. The children [redacted] are having visits with their mother and [redacted] visits are going "okay".

Start Date: 05-02-2019
Stop Date:
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 03:31 PM
Stop Time:
Contact Type: OTHER
Travel Time:

Note Type(s)
CLOSING SUMMARY

Contact With

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, MATHEW
WILLIAMS, HERMAN

Author: COLLIER, TERRENCE
Title: FAMILY SERVICES SPEC SUPV

[redacted]

On February 27, 2019 a repot made to Child Protective Services with allegations of Physical Injury Abuse with bruises/cuts. The alleged victims listed in this report 14 yo Abigail Williams, 12 yo Herman Jr Williams, 8 yo Matthew Williams and 5 yo Elisha Williams, the children [redacted] lives in the home with their natural parents mother Nadine Williams and Herman Williams, along with maternal grandmother [redacted] the mother dragged Abigail by her hair into her room, injuries unknown, Abigail was [redacted] hit in the head with a pipe on her forehead which caused bleeding. The findings in this report are substantiated as to the allegations of physical abuse with injuries involving Abigail Williams by her mother. [redacted]

Start Date: 05-02-2019
Stop Date:
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 03:21 PM
Stop Time:
Contact Type: OTHER
Travel Time:

Note Type(s)
CLOSING SUMMARY

Contact With

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, MATHEW
WILLIAMS, HERMAN

Author: COLLIER, TERRENCE
Title: FAMILY SERVICES SPEC SUPV

[redacted]

[redacted]. Herman William Sr. admits that he was made aware of the

abuse/neglect of his children by their mother when he was not in the home. Herman claims he work various hours due to his business as an independent driver/owner. Herman provided copies of restraining orders he has tried to obtain against his wife, [redacted] . after each incident of recent domestic violence in the home. The restraining orders were denied reasons unknown to this writer. Herman Sr. secured a home for the children and moved the children out of the home along with the maternal grandmother. Herman claims he is filing for a divorce and plans to file for physical custody of his children. It appears what lead up to what is described as mother aggressive behavior towards the entire family is mother starting a relationship with another man. [redacted]

[redacted]

Start Date: 05-02-2019
Stop Date:
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 03:52 PM
Stop Time:
Contact Type:
Travel Time:

Note Type(s)
CLOSING SUMMARY

Author: GIPSON, KIMBERLY
Title: SR FAMILY SERVICES SPEC

This case will not remain open for ongoing services through this agency at this time the children are safe in the care of their father and maternal grandmother. [redacted] The children are living in the home with their father and only have visitation with their mother pending their parents divorce. At this time this is a custody matter and the parents both agree to proceed with their divorce to address their custody issues with their children. This agency referred natural father to Positivity Kids for medical services for the children which resulted in the children being giving referrals to counseling services and two of the children were referred to specialist due to injuries related to the physical abuse caused by their mother. The allegations of Physical Injury abuse with bruises /cuts is substantiated due to the statements submitted by the children and interview with father Herman Williams along with Nadine admitting to some of the incidents of physical discipline. Evidence of physical discipline was observed on Abigail head and she required medical attention as a result of this injury.

Start Date: 05-07-2019
Stop Date: 05-07-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 03:00 PM
Stop Time: 03:15 PM
Contact Type: OTHER
Travel Time:

Note Type(s)
SPVSYCONTACT

TCM Activity Type(s)
NONE

Contact With

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, NADINE

Author: COLLIER, TERRENCE

Title: FAMILY SERVICES SPEC SUPV

Case will be closed Substantiated for Physical Injury, Abuse/Bruises/Cuts regarding the mother, Nadine Williams and her child, Abigail Williams.

[redacted]

Substantiation letter mailed to LKA

[redacted]

Start Date: 05-07-2019
Stop Date:
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 03:24 PM
Stop Time:
Contact Type:
Travel Time:

Note Type(s)
CLOSING SUMMARY

Author: COLLIER, TERRENCE
Title: FAMILY SERVICES SPEC SUPV

Supervisor closed the last open program, so the case was closed.

Start Date: 05-16-2019
Stop Date: 05-16-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 09:10 AM
Stop Time: 09:41 AM
Contact Type: OTHER
Travel Time:

Note Type(s)
CPS APPEAL

TCM Activity Type(s)
NONE

Contact With
WILLIAMS, NADINE

Contact About
WILLIAMS, NADINE

Author: HALEY, GENYPHUR
Title: LEGAL OFFICE ASSISTANT II

Appeal request received for Nadine Williams, for report # [redacted] on 05/15/2019. Receipt letter sent to appellant.

Start Date: 10-29-2019
Stop Date: 10-29-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 12:41 PM
Stop Time: 01:17 PM
Contact Type: INPERSON-OTHER
Travel Time: 25 minutes

Note Type(s)
CHILDCONTACT

TCM Activity Type(s)
CASEPLN DEVEL

Contact With
WILLIAMS, ABIGAIL

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: HOWARD, EVETTE
Title: FAMILY SERVICES SPEC I

SP met face to face with child-ABIGAIL in the conference room of [redacted] High School. She was clean, appeared healthy and was appropriately dressed in a white t shirt, black jacket, jeans, black socks, flip flops and wore braces. She is 15yo and in the 10th grade. [redacted]

[redacted]

[redacted]

Start Date: 11-01-2019
Stop Date: 11-01-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 08:46 AM
Stop Time: 09:00 AM
Contact Type: PHONE
Travel Time:

Note Type(s)
COLLATERAL

TCM Activity Type(s)
NONE

Contact With

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: HOWARD, EVETTE
Title: FAMILY SERVICES SPEC I

[redacted]

Start Date: 11-01-2019
Stop Date: 11-01-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 09:31 AM
Stop Time: 10:27 AM
Contact Type: INPERSON-OFFICE
Travel Time:

Note Type(s)
PARENT CONTACT

TCM Activity Type(s)
NONE

Contact With
WILLIAMS, HERMAN

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: HOWARD, EVETTE
Title: FAMILY SERVICES SPECI

SP met face to face with father-Herman in the office. He brought the order between he and Nadine showing the stipulations of the temporary joint custody of the children and shows that the mother has day visitation of the children on Saturday from 10am to 6pm along with the holiday schedule. He states Herman III did not want to do with the mother this past weekend and that Abigail took her clothes with her over this past weekend when she went with her mother

He states the school contacted him on Monday stating that she was late to school and that Abigail has detention. Says the mom got the kids this past weekend and she bought the boys back. He wants to transfer her to another school as he lives in North Las Vegas and the court order says that he is able to transfer to what school he feels fit to. He was going to keep her at [redacted] but she is smoking marijuana and other sorts so it will be better to transfer her and better on the commute. He also called 311 when her mother did not bring her back when she was supposed to, the police came to the home and said that she has the whole weekend. No joint custody at this time.

For NV day weekend, he turned off his daughter's phone. Says that now Abigail is the one that the mother is targeting and buying things for. She did not even pick up Herman on his birthday as she is to see the kids on their birthdays. His birthday is 8/24/19. She also did not pick them up on Labor Day. She buys Abby things but not the boys, has ha bought the boys things recently. He found she cancelled the plates on the truck 7/24/19 as it is in her name but the court order states to leave it alone until the trial which is in February 2020. They went to court Friday 10/30/19 for a pick up order of Abigail and by the end of today he should be getting the order and going to the home to get the child along with the police and he will transfer child to a school [redacted]

[redacted]

Start Date: 11-01-2019
Stop Date: 11-01-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 09:31 AM
Stop Time: 10:27 AM
Contact Type: INPERSON-OFFICE
Travel Time:

Note Type(s)
CHILDCONTACT

HGW 172

TCM Activity Type(s)
NONE

Contact With
WILLIAMS, ELISHA
WILLIAMS, MATHEW
WILLIAMS, HERMAN

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: HOWARD, EVETTE
Title: FAMILY SERVICES SPEC I

SP met face to face with the father and the children. The children were clean, appeared heathy and all observed with no marks or bruises. They were out of school for today as the father stated that he would take them after meeting with the SP. None of the children are on IEP's or have behavioral or attendance problems in school. None of the children take any medicaitons.

ELISHA was dressed in a black sweatshirt, blue shirt, blue jeans and black tennis shoes. he is described as the terrorizer of the home but does well in school. He attends [redacted] Elementary School and is in the 1st grade.

MATTHEW was wearing a sweatshirt, brown sweats and black tennis shoes. He also attends [redacted] and is in the 4th grade.

HERMAN III was in a black jacket, black polo, had a school lanyard around his neck, jeans, tennis shoes on one foot, wore glasses and was on crutches. [redacted] he was hit by a car on 10/06/19 while riding a mini dirt bike and his foot broke. He has it in a cast now and goes back to the doctor on 11/18 to get placed into a short cast for more mobility. He attends [redacted] Middle School and is in the 6th grade.

Start Date: 11-04-2019
Stop Date: 11-04-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 02:30 PM
Stop Time: 02:40 PM
Contact Type: OTHER
Travel Time:

Note Type(s)
7DAYSPRVSRRVW

TCM Activity Type(s)
NONE

Contact With

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: COLLIER, TERRENCE
Title: FAMILY SERVICES SPEC SUPV

Update child contacts, parent contacts, and collateral contacts
Concerns that the mother kept the child, Abigail with her although she is only supposed to have visitation with the children as per the custody agreement. The parents are in custody court and have an upcoming hearing
The mother has Substantiation from earlier in the year due to physical abuse on Abigail
[redacted]

Start Date: 11-12-2019
Stop Date: 11-12-2019
In Placement Contact: NO
Unscheduled Visit: NO

Start Time: 01:06 PM
Stop Time: 01:18 PM
Contact Type: PHONE
Travel Time:

Note Type(s)
PARENT CONTACT

TCM Activity Type(s)
NONE

Contact With
WILLIAMS, HERMAN

Contact About
WILLIAMS, ABIGAIL
WILLIAMS, ELISHA
WILLIAMS, HERMAN
WILLIAMS, MATHEW
WILLIAMS, NADINE
WILLIAMS, HERMAN

Author: HOWARD, EVETTE
Title: FAMILY SERVICES SPEC I

SP spoke with father-Herman [redacted] regarding follow up and the status of pick up order for Abigail. He states that he did go to court but that the order was denied as the judge stated that he did not supply enough information in the order. He says that he does not know how to complete information. He will now just have to wait until they go to court on 12/16/19 for the motions that he filed Nadine keeping Abigail, for the truck plates and one other offense. He says this past weekend the boys did not even want to go over with her Says they called him the entire time up until 6pm stating they were hungry and to get them something to eat. She was not paying them any attention or getting them anything to eat and they were hungry. HE says that he will wait until court.

EXPLORATORY

1. What is the extent of child maltreatment?

[redacted] the mother has dragged Abigail (14) by the hair to her room and she has also hit her on the forehead with a pipe.

2. What are the circumstances surrounding the child maltreatment?

[redacted] yesterday, 2.26.2019, the mother, Nadine, dragger her daughter Abigail (14) by her hair into the bedroom. [redacted] during the incident there was a lot of screaming and yelling. [redacted]

[redacted] the mother dragged Abigail into her room because the mother brought a man into the home with "romantic intentions" and Abigail called to man to confront him. When the mother found out, she then broke Abigail's phone and dragged her to her room. [redacted] Abigail then called the police and the police responded. The father was not present during this incident [redacted]

[redacted] the police were called two other different time with in the last three days.

[redacted] around 2.23.2019 the police were called out to the home because of an incident that occurred with the mother and grandmother. [redacted] the grandmother "exposed" the mother about her "romantic intentions" with his other man. [redacted] the mother, grandmother and other man were all in the home and the mother and grandmother began to argue. At some point during the argument the mother grabbed the grandmother by her throat and took her outside. [redacted]. The argument continued outside and [redacted] the grandmother began to yell very loudly outside and at that point the mother dragged the grandmother inside. [redacted] the mother hit the grandmother in the face. [redacted] The grandmother sustained an injury to her shoulder, [redacted]. The police the offered the grandmother medical attention, however [redacted] she denied and just put ice on her shoulder. [redacted]

[redacted] the other incident where police were called happened around 2.24.2019 [redacted] Abigail called the police due to a missing a gun. [redacted] the gun was located in a drawer in the home. [redacted]

The maternal grandmother, [redacted] found a bullet in the parents closet and confiscated the bullet. [redacted] when the gun went missing the father, Herman, confiscated the remaining bullets in the home. [redacted] the Philly's and Herman believe the mother has the gun due to her recent behaviors. The gun is [redacted] still [redacted] "missing." [redacted] Neither parent has ever been known to act out violently.

[redacted] yesterday, 2.25.2019, the mother told all four children that she is going to get rid of the grandmother and father and they will be happy family again.

The mother [redacted] is serving the grandmother and father an eviction notice. The grandmother and father are still living in the home as of 2.26.2019.

[redacted]

[redacted] the mother hit Abigail with a pipe on the forehead. [redacted] Abigail sustained an injury as she was bleeding. [redacted] The incident was reported to the father and the school. [redacted]

3. How do the children function on a daily basis?

Per Juvenile Court School, Abigail(14) is in the 9th grade at [redacted] HS. Elisha (5) is in kindergarten at [redacted] ES, Mathew (8) is in the 3rd grade at [redacted] Es, and Herman (12) is in the 5th grade at [redacted] ES.

[redacted] the children do not have special need, medical needs or behavioral issues. [redacted] the children are very active and they all do overall well in school.

4. How do the adults (primary caretakers) function on a daily basis?

[redacted] the mother is employed as a medical professional. [redacted]

[redacted] in one of the incidents when the police were called to the home, the mother put on her stethoscope and told police she had just arrived home from work and she does not why they were called out to the home as they were told lies.

The father is [redacted] employed as a card teller and to be hard working. [redacted]

[redacted]

5. What are the general parenting practices in this family?

HGW 175

ED EXHIBIT

DEFENDANT'S EXHIBIT HH

PENGAD 800-631-6989

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AGT 734865 LOC 000000 DT 102820 $25.00 25DOLLARS AND NO CENTS

Nov 20, payment I.R.S

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PURCHASE AGREEMENT: You the purchaser agree that Western Union Financial Services Inc. (WUFSI) need not stop payment on, or replace, or refund a lost or stolen WUFSI Money Order unless (1) you fill in the face of the Money Order at the time of purchase, and (2) you report the loss or theft to Western Union Financial Services Inc. in writing immediately, and (3) You provide WUFSI with this original Money Order receipt issued by Western Union Financial Services Inc., Englewood, Colorado. For customer service, call 1-800-999-9660.

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AGT 734865 LOC 000000 DT 071520 $25.00 25DOLLARS AND NO CENTS

Payable to:

RETAIN THIS MONEY ORDER RECEIPT. IT MUST BE INCLUDED WITH ALL REFUND REQUESTS. BE SURE TO READ IMPORTANT INFORMATION BELOW AND ON BACK. For your own records, it is recommended that you make a photocopy of the completed Money Order before providing it to the receiver.

PURCHASE AGREEMENT: You the purchaser agree that Western Union Financial Services Inc. (WUFSI) need not stop payment on, or replace, or refund a lost or stolen WUFSI Money Order unless (1) you fill in the face of the Money Order at the time of purchase, and (2) you report the loss or theft to Western Union Financial Services Inc. in writing immediately, and (3) You provide WUFSI with this original Money Order receipt issued by Western Union Financial Services Inc., Englewood, Colorado. For customer service, call 1-800-999-9660.

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Dept of Treasury IRS Ogden UT 84201

* 19121820024 *

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ACT 734865 LOC 000000 07 102820 $25.00 25DOLLARS AND NO CENTS

I.R.S.

OCT. payment.

2020

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MONEY ORDER RECEIPT - NON NEGOTIABLE

I.R.S. P.O. Box 932600 Louisville, Ky 40293-2600.

* 19147837790 *

Department of the Treasury
Internal Revenue Service
Ogden, UT 84201-0030

	SB
Notice	CP521
Tax year	2016
Notice date	August 19, 2020
Taxpayer ID number	XXX-XX-1742
To contact us	Phone 800-829-8374
Your Caller ID	116474

Page 1 of 5

010323.262537.405780.14616 2 AV 0.389 1020

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

0323

Your installment agreement

Monthly payment due: $25.00

Your monthly payment of $25.00 must be received by August 28, 2020. If you can't pay your monthly bill by this date, call us at 800-829-8374 to discuss your situation.

Payment Information

Amount you owe	$600.73
Payment due date	August 28, 2020
Minimum payment due	**$25.00**

What you need to do immediately

- Your payment of $25.00 must be received by August 28, 2020, or you may default on your agreement. If you default, you may have to pay a user fee to reinstate it.
- Pay online or mail a check or money order with the attached payment stub. **You can pay online now at www.irs.gov/payments.**

Continued on back...

PENGAD 800-631-6989

DEFENDANT'S EXHIBIT

SED EXHIBIT

D 556291

HGW 279

Installment agreement summary

Tax year	Form	Amount you owe	Failure-to-pay penalty to date	Interest charges to date
2016	1040	600.73	454.90	837.83

Remaining balance **$600.73**

10323 The penalty and interest charges shown above represent the total amounts charged since your liability became due. To determine the amount of penalty and interest charged since your last reminder notice, compare the amounts in last month's reminder notice with the amounts shown above.

Penalties

We are required by law to charge any applicable penalties.

Failure-to-pay

Description	Amount
Total failure-to-pay	**$454.90**

We assess a 1/2% monthly penalty for not paying the tax you owe by the due date. We base the monthly penalty for paying late on the net unpaid tax at the beginning of each penalty month following the payment due date for that tax. This penalty applies even if you filed the return on time.

We charge the penalty for each month or part of a month the payment is late; however, the penalty can't be more than 25% in total.

- The due date for payment of the tax shown on a return generally is the return due date, without regard to extensions.
- The due date for paying increases in tax is within 21 days of the date of our notice demanding payment (10 business days if the amount in the notice is $100,000 or more).

If we issue a Notice of Intent to Levy and you don't pay the balance due within 10 days of the date of the notice, the penalty for paying late increases to 1% per month. If you receive a Notice of Intent to Levy, you will also receive information on how to appeal if you disagree with the action. We'll provide information about your appeal rights with the notice and you'll have the opportunity to appeal at that time.

For individuals who filed on time, the penalty decreases to 1/4% per month while an approved installment agreement with the IRS is in effect for payment of that tax.

For a detailed calculation of your penalty charges, call 800-829-8374.
(Internal Revenue Code Section 6651)

Continued on back...

Money-saving tips

- Visit www.irs.gov/paymentplan. The Online Payment Agreement application will allow you to:
  - Submit your payment online
  - Change your due date
  - Get a payoff amount
  - Create an automated Direct Debit Installment Plan—it's easy and you'll never miss a payment. You'll save time, trees and postage.
- Pay a little more each month. This will help you finish paying sooner and will save you money in the long run.

Review the electronic payment options in this notice.

010323

Additional information

- Visit www.irs.gov/cp521
- For tax forms, instructions, and publications, visit www.irs.gov/forms-pubs or call 800-TAX-FORM (800-829-3676).
- Paying online is convenient, secure, and ensures timely receipt of your payment. To pay your taxes online or for more information, go to www.irs.gov/payments.
- You can contact us by mail at the address at the top of the first page of this notice. Be sure to include your taxpayer identification number, the tax year, and the form number you are writing about.
- Keep this notice for your records.

The Taxpayer Bill of Rights describes ten basic rights that all taxpayers have when dealing with the IRS. For additional information, refer to the Taxpayer Bill of Rights at http://taxpayeradvocate.irs.gov/about-tas/taxpayer-rights. (Internal Revenue Code Section 7803(a)(3))

If you need assistance, please don't hesitate to contact us.

Department of the Treasury
Internal Revenue Service
Ogden, UT 84201-0030

	SB
Notice	CP521
Tax year	2016
Notice date	September 16, 2020
Taxpayer ID number	XXX-XX-1742
To contact us	Phone 800-829-8374
Your Caller ID	116474
Page 1 of 5	

034451.949893.135277.31826 2 AV 0.389 1027

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

I4451

Your installment agreement

Monthly payment due: $25.00

Your monthly payment of $25.00 must be received by September 28, 2020. If you can't pay your monthly bill by this date, call us at 800-829-8374 to discuss your situation.

Payment Information

Amount you owe	$601.48
Payment due date	September 28, 2020
Minimum payment due	**$25.00**

What you need to do immediately

- Your payment of $25.00 must be received by September 28, 2020, or you may default on your agreement. If you default, you may have to pay a user fee to reinstate it.
- Pay online or mail a check or money order with the attached payment stub. **You can pay online now at www.irs.gov/payments.**

Continued on back...

Installment agreement summary

Tax year	Form	Amount you owe	Failure-to-pay penalty to date	Interest charges to date
2016	1040	601.48	454.90	838.58

Remaining balance **$601.48**

34451 The penalty and interest charges shown above represent the total amounts charged since your liability became due. To determine the amount of penalty and interest charged since your last reminder notice, compare the amounts in last month's reminder notice with the amounts shown above.

Penalties

We are required by law to charge any applicable penalties.

Failure-to-pay

Description	Amount
Total failure-to-pay	**$454.90**

We assess a 1/2% monthly penalty for not paying the tax you owe by the due date. We base the monthly penalty for paying late on the net unpaid tax at the beginning of each penalty month following the payment due date for that tax. This penalty applies even if you filed the return on time.

We charge the penalty for each month or part of a month the payment is late; however, the penalty can't be more than 25% in total.

- The due date for payment of the tax shown on a return generally is the return due date, without regard to extensions.
- The due date for paying increases in tax is within 21 days of the date of our notice demanding payment (10 business days if the amount in the notice is $100,000 or more).

If we issue a Notice of Intent to Levy and you don't pay the balance due within 10 days of the date of the notice, the penalty for paying late increases to 1% per month. If you receive a Notice of Intent to Levy, you will also receive information on how to appeal if you disagree with the action. We'll provide information about your appeal rights with the notice and you'll have the opportunity to appeal at that time.

For individuals who filed on time, the penalty decreases to 1/4% per month while an approved installment agreement with the IRS is in effect for payment of that tax.

For a detailed calculation of your penalty charges, call 800-829-8374.
(Internal Revenue Code Section 6651)

Continued on back...

Department of the Treasury
Internal Revenue Service
Ogden, UT 84201-0010

Notice	CP39
Tax Year	2016
Notice date	October 26, 2020
Social Security number	[redacted]1742
To contact us	800-829-8374
Your Caller ID	116474
Page 1 of 1	29H

067399.965689.213149.603 1 AV 0.389 640

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

:7399

We applied a 2019 overpayment to tax you owe for 2016

Amount due: $0.00

We applied the $572.93 overpayment from your 2019 tax return to the amount owed on the tax return you filed in 2016. As a result, the amount you owe for 2016 is $0.00.

Billing Summary

Amount owed on 2016 tax return	$572.93
Overpayment applied from 2019	-$572.93
Amount due	**$0.00**

What you need to do

You don't need to respond to this notice.

Additional information

- Visit www.irs.gov/cp39
- You may find the following publications helpful:
  - Publication 1, Your Rights as a Taxpayer
  - Publication 594, The Collection Process
- For tax forms, instructions, and publications, visit www.irs.gov/forms-pubs or call 800-TAX-FORM (800-829-3676).
- Paying online is convenient, secure, and ensures timely receipt of your payment. To pay your taxes online or for more information, go to www.irs.gov/payments.
- You can contact us by mail at the address at the top of the first page of this notice. Be sure to include your Social Security number and the tax year and form number you are writing about.
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

HGW 284

Changes to your 2017 tax return

Your income and deductions	Shown on return	As corrected by IRS	Difference
Cancellation of debt	$0	$16,847	$16,847
Taxable wages	$150,884	$153,742	$2,858
Income net difference			**$19,705**
Miscellaneous deduction	$47,194	$46,800	-$394
Deduction net difference *1			**-$394**
61676 **Change to taxable income**			**$20,099**

Your tax computations	Shown on return	As corrected by IRS	Difference
Taxable income, line 43	$72,382	$92,481	$20,099
Tax, line 44	$9,924	$14,596	$4,672
Alternative minimum tax, line 45	$7,026	$8,029	$1,003
Credit for child and dependent care expenses, line 49	$1,200	$1,200	$0
Child tax credit, line 52	$2,950	$1,950	-$1,000
Total tax, line 63	$12,800	$19,475	$6,675
Tax you owe *2			**$6,675**

Payments	Shown on return	As corrected by IRS	Difference
Income tax withheld, line 64	$20,876	$20,912	$36
Total payments *3			**$36**

(*1) Decreases to deductions result in an increase to taxable income.
(*2) Decreases to credits result in an increase to tax.
(*3) Increases to payments decrease the amount owed.

Explanation of changes to your 2017 Form 1040

This section tells you specifically what income information the IRS received about you from others (including your employers, banks, mortgage holders, etc.). This information doesn't match the information you reported on your tax return.

Use the table to compare the data the IRS received from others to the information you reported on your tax return to understand where the difference(s) occurred. To assist you in reviewing your income amounts, the table may include both reported and unreported amounts.

Taxable Wages

Received from	Address	Account Information	Shown on return	Reported by others	Difference
LTS TRANSPORTATION INC	6800 W GARY AVE LAS VEGAS NV 89139	SSN 105-66-1742 Form W-2	**$0**	**$2,858**	**$2,858**

Cancellation of Debt

Received from	Address	Account Information	Shown on return	Reported by others	Difference
BANK OF AMERICA N.A	PO BOX 982236 EL PASO TX 799982236	0000440066812913197 7 SSN 081-94-8593 Form 1099-C Date 8/26/17	-	$1,229	-
LENDINGCLUB CORPORATION	71 STEVENSON ST SUITE 1000 SAN FRANCISCO CA 94105	964257273 SSN 081-94-8593 Form 1099-C Date 11/20/17	-	$10,471	-

Continued on back...

IRS

51676

Cancellation of Debt - Form 1099-C
If a federal government agency, financial institution, credit union, or other lender cancels or forgives a debt you owe, you may receive a Form 1099-C, Cancellation of Debt. In most cases, you must include the canceled or forgiven amount in your income. There are several situations in which you don't have to include the canceled amount as income, but these exclusions are not automatic. You must claim the benefit of any exclusion by filing Form 982, Reduction of Tax Attributes Due to Discharge of Indebtedness (and Section 1082 Basis Adjustment).

You can only exclude debt cancellation up to the insolvent amount. If you can exclude the canceled debt due to insolvency, provide a detail of your total assets and liabilities immediately before the discharge. You are insolvent to the extent your total liabilities exceeded your total assets. For more information and a worksheet to help calculate insolvency, see Publication 4681, Canceled Debts, Foreclosures, Repossessions and Abandonments (for Individuals). You must include any canceled debt that exceeds the amount of your insolvency as income on your tax return, unless another exclusion applies.

If you filed for bankruptcy, provide to us a copy of your bankruptcy paperwork to show you included the canceled debt in the bankruptcy. If you don't make payments you owe on a loan secured by property, the lender may foreclose on the loan or repossess the property. The foreclosure or repossession is treated as a sale or exchange from which you may realize a gain or loss. If the lender foreclosed on your principal residence, you may realize ordinary income from cancellation of debt if the loan balance is more than the fair market value of the property. If the amount of principle you owed on your home mortgage was reduced as part of a loan modification, you may be able to exclude the amount of canceled debt from income.

For additional information on these topics, see Publication 4681, Canceled Debts, Foreclosures, Repossessions, and Abandonments (for Individuals), or Publication 544, Sales and Other Dispositions of Assets.

Schedule A miscellaneous deductions percentage limitation
Miscellaneous deductions are reduced by 2% of your adjusted gross income. Since we refigured your adjusted gross income, we also refigured your miscellaneous deduction.

Alternative Minimum Tax
Based on changes to your adjusted gross income, we refigured your alternative minimum tax. If your calculations differ from ours, send us a copy of your Form 6251, Alternative Minimum Tax-Individuals.

Continued on back...

Department of the Treasury
Internal Revenue Service
310 LOWELL ST
ANDOVER MA 01810-4544

9307 1107 5660 7319 9596 02

061676.302841.66034.18952 2 MB 0.439 1336

HERMAN G & NADINE A WILLIAMS JR
NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

51676

Notice	CP3219A
Tax year	2017
Notice date	January 4, 2021
Social Security number	XXX-XX-1742
AUR control number	70071-0041
To contact us	Phone 1-800-829-8310 Fax 1-877-477-9485
Last date to petition Tax Court	April 5, 2021
Page 1 of 12	

10566174220172

Notice of Deficiency
Proposed increase in tax and notice of your right to challenge

We have determined there is a deficiency (increase) in your 2017 income tax based on information we received from third parties (such as employers or financial institutions) that doesn't match the information you reported on your tax return. See below for an explanation of how this increase was calculated. This letter is your NOTICE OF DEFICIENCY, as required by law.

If you disagree
You have the right to challenge this determination in U.S. Tax Court. If you choose to do so, you must file your petition with the Tax Court by April 5, 2021. This date can't be extended. See below for details about how and where to file a petition.

If you agree
You can pay now or receive a bill. See the section below titled "If you agree with the proposed changes, you can pay now or receive a bill."

Summary of proposed changes

Increase in tax (deficiency)	$6,675
Substantial tax understatement penalty	$1,328

If you want to resolve this matter with the IRS
You may be able to resolve this matter without going to the U.S. Tax Court if you contact us directly. See the "You may be able to resolve your dispute with the IRS" section below.

If you want assistance
You may be able to receive assistance from a Low Income Taxpayer Clinic or from the Taxpayer Advocate Service. See the "Additional information" section below.

You have the right to petition the Tax Court

You have the right to challenge our deficiency determination, including penalties, before making any payment by filing a petition with the U.S. Tax Court. You must file your petition within 90 days (or 150 days if the notice is addressed to a person outside of the United States) from the date of this letter, which is **April 5, 2021**. The Tax Court can't consider your case if the petition is filed late. If you decide to file a petition, send that petition to the following address:

United States Tax Court
400 Second Street, NW
Washington, DC 20217

Continued on back...

HGW 287

You'll receive a bill for the amount due (including any interest and applicable penalties).

- NOTE: If you filed your tax return married filing jointly, **both** spouses must sign Form 5564.
- Do NOT mail the Form 5564 or any payment of your liability to the Tax Court.

61676

If we don't hear from you

If we do not hear from you and you do not petition the U.S. Tax Court, we will assess the additional tax you owe plus any applicable penalties and interest and send you a bill.

Additional information

Visit www.irs.gov/cp3219a for more information about this notice, frequently asked questions, and to review the following:

- Publication 1, Your Rights as a Taxpayer
- Publication 5181, Tax Returns Reviewed by Mail: CP2000, Letter 2030, CP2501, Letter 2531

For tax forms, instructions, and publications, visit www.irs.gov/forms-pubs or call 800-TAX-FORM (800-829-3676).

Keep this notice for your records.

If you'd like to authorize someone to represent you before the IRS, please complete and send us a Power of Attorney and Declaration of Representative (Form 2848), before your representative contacts us on your behalf.

The IRS office whose phone number appears at the top of the notice can best address and access your tax information and help get you answers. If you filed a joint return, we're required to send a copy of this notice to both you and your spouse. Each copy contains the same information about your joint account.

Low Income Taxpayer Clinics
Low Income Taxpayer Clinics (LITCs) represent individuals whose income is below a certain level that need help to resolve a tax problem with the IRS. IRS problems can include audits, appeals, tax collection disputes, and cases in the U.S. Tax Court. LITCs can also provide information about taxpayer rights and responsibilities in different languages. Services are offered for free or for a small fee. For more information and to find an LITC near you, see the LITC page on www.irs.gov/advocate or IRS Publication 4134, Low Income Taxpayer Clinic List. This publication is also available by calling 800-829-3676 or at your local IRS office. LITCs are independent from the IRS.

Taxpayer Advocate Service
The IRS office whose phone number appears at the top of the notice can best address and access your tax information and help get you answers. However, you may be eligible for free help from the Taxpayer Advocate Service (TAS) if you can't resolve your tax problem with the IRS, or you believe an IRS procedure just isn't working as it should. TAS is an independent organization within the Internal Revenue Service (IRS) that helps taxpayers and protects taxpayer rights. Call TAS at 877-777-4778 or TTY/TDD 800-

Continued on back...

Interest charges

We are required by law to charge interest when you do not pay your liability on time. Generally, we calculate interest from the due date of your return (regardless of extensions) until you pay the amount you owe in full, including accrued interest and any penalty charges. Interest on some penalties accrues from the date we notify you of the penalty until it is paid in full. Interest on other penalties, such as failure to file a tax return, starts from the due date or extended due date of the return. Interest rates are variable and may change quarterly. (Internal Revenue Code Section 6601)

Interest is calculated to 30 days from the date of the notice for domestic addresses and 60 days from the date of the notice for foreign and APO/FPO/DPO addresses. Interest will continue to accrue until you pay the amount you owe in full.

51676

Continued on back...

HGW 289

FORM 5564 (November 2016)	Department of the Treasury — Internal Revenue Service **Notice of Deficiency - Waiver**	Symbols ANDOVER 860 ANSC
Name and address of taxpayer(s)	**HERMAN G & NADINE A WILLIAMS JR** **NADINE A WILLIAMS JR** **5321 CHINO HEIGHTS ST** **N LAS VEGAS NV 89081-2970**	**January 4, 2021**
	[redacted] **742** [redacted] **8593**	
Kind of Tax	☐ Copy to Authorized Representative	
Individual Income		
Tax year ended	**Deficiency**	
December 31, 2017	Increase in tax **$6,675**	Penalties
61676		**Accuracy-Related Penalty, IRC Section 6662(a)** **$1,328**

10566174220172

I consent to the immediate assessment and collection of the deficiencies (increase in tax and penalties) shown above, plus any interest. Also, I waive the requirement under section 6532 (a) (1) of the Internal Revenue Code that a notice of claim disallowance be sent to me by certified mail for any overpayment shown on the attached report.

I understand that the filing of this waiver is irrevocable and it will begin the 2-year period for filing suit for refund of the claims disallowed as if the notice of disallowance had been sent by certified or registered mail.

Signature			Date
			Date
	By	Title	Date

Note: If you consent to the assessment of the deficiencies shown in this waiver, please sign and return this form to limit the interest charge and expedite our bill to you. Please do not sign and return any prior notices you may have received. Your consent signature is required on this waiver, even if fully paid.

Your consent will not prevent you from filing a claim for refund (after you have paid the tax) if you later believe you are so entitled; nor prevent us from later determining, if necessary, that you owe additional tax; nor extend the time provided by law for such action.

If you later file a claim and the Service disallows it, you may file suit for refund in a District Court or in the United States Claims Court, but you may not file a petition with the United States Tax Court.

Who Must Sign: If you filed jointly, both you and your spouse must sign. Your attorney or agent may sign this waiver provided that action is specifically authorized by a power of attorney which, if not previously filed, must accompany this form.

If this waiver is signed by a person acting in a fiduciary capacity (for example, an executor, administrator, or a trustee), Form 56, Notice Concerning Fiduciary Relationship, should, unless previously filed, accompany this form.

If you agree, please sign and return this form; keep one copy for your records.

FORM 5564(Rev. 11-2016)

HGW 290

15530

Installment Agreement Activity

for July 15, 2019 to September 7, 2020

Tax Period	Form Number	Beginning Balance	Total Payments Received	Total Penalty Added	Total Interest Added	Other Charges Added	Ending Balance
12/31/2016	1040	$ 599.95	$ 0.00	$ 0.00	$ 1.02	$ 0.00	$ 600.97
	Total	$ 599.95	$ 0.00	$ 0.00	$ 1.02	$ 0.00	$ 600.97

For information on your penalty and interest computations, you may call 1-800-829-8374 .

HGW 291

IRS Department of the Treasury
Internal Revenue Service
310 LOWELL ST
ANDOVER MA 01810-4544

In reply refer to: 0883060008
Oct. 19, 2020 LTR 2626C A1
[redacted]1742 201712 30
Input Op: 0883060008 00010409
BODC: NOBOD

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

Taxpayer identification number: [redacted]1742
Tax period: Dec. 31, 2017
Tax form: 1040
600640008

Dear Herman G & Nadine A Williams Jr:

Thank you for your reply dated Mar. 27, 2020, to our inquiry about changes to items on your tax return.

We cannot process your Form 1040X as submitted. The attached Schedule C does not have an amount on Line 1. We do not have any taxable income reported for you as Form 1099-MISC, Non Employee Compensation. You cannot claim expenses against zero income.

The income was reported to us as a Form W-2 wage income. If you disagree with how the income was reported to us, please contact the payer for clarification. Please obtain a corrected Form W-2, if necessary, and forward to us.

We're required to charge interest on unpaid tax from the due date of the return to the date you pay the tax in full. We can't reduce or eliminate interest based on reasonable cause.

We charge a 1/2% monthly penalty on unpaid tax from the due date of the return, but not for a total of more than 25% of your unpaid tax.

Send your signed consent or explanation by Nov. 11, 2020. You can also fax your consent or explanation to 877-477-9485. If we don't hear from you by that time, we'll continue to process the proposed changes to your tax return based on the information we have. If you have a balance due, we'll continue to charge interest and applicable penalties until you pay the balance due in full.

If you have questions, you can call Office of C McCarthy at 800-829-8310 between 7:00 AM and 8:00 PM EDT or fax us at 877-477-9485.

If you prefer, you can write to the address at the top of the first page of this letter.

When you write, include a copy of this letter, and write your telephone number and the hours we can reach you in the spaces below.

HGW 292

0883060008
Oct. 19, 2020 LTR 2626C A1
[redacted]1742 201712 30
Input Op: 0883060008 00010411

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

Consent to Tax Increase

I/We consent to the immediate assessment and collection of the increase in tax and penalties as previously shown on the Notice CP2000, plus any interest due. I/We will not be able to contest these changes for the tax periods shown in this letter in the U.S. Tax Court, unless additional tax is determined to be due for this tax period.

Your signature_____ Date _____

Spouse's signature _____ Date_____
(REQUIRED IF YOU FILED A JOINT TAX RETURN)

Your taxpayer identification number _____
Tax periods_____

HGW 293

IRS Department of the Treasury
Internal Revenue Service
310 LOWELL ST
ANDOVER MA 01810-4544

In reply refer to: 0883070024
Sep. 10, 2020 LTR 2626C A1
[redacted]1742 201712 30
Input Up: 0883070024 00016389
BODC: NOBOD

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

Taxpayer identification number: [redacted]1742
Tax period: Dec. 31, 2017
Tax form: 1040
700590227

Dear Herman G & Nadine A Williams Jr:

Thank you for your reply dated Mar. 11, 2020, to our inquiry about changes to items on your tax return.

Debt cancellation occurs when a debtor does not satisfy the terms of a financial agreement between him/ herself and the lender, The lender takes a loss on the monies not received; the loss then is considered income belonging to the debtor. The financial agreement may refer to a line of credit, credit card, loan, etc.

Payer's name: LTS TRANSPORTATION INC

Address: 6800 W GARY AVE
LAS VEGAS NV 89139-7315

We're required to charge interest on unpaid tax from the due date of the return to the date you pay the tax in full. We can't reduce or eliminate interest based on reasonable cause. You can find more information in the enclosed Notice 746, Information About Your Notice, Penalty and Interest.

We need you to sign the "Consent to Tax Increase" at the end of this letter so we can complete our action on your tax account. Sign the consent statement and send it to us. If you filed a joint return, both you and your spouse must sign the consent.

If you don't agree with our proposed changes, send us a signed statement explaining why you disagree. If you agree with our proposed changes, sign the "Consent to Tax Increase" at the end of this letter. If you filed a joint return, both you and your spouse must sign the consent.

Send your signed consent or explanation by Oct. 04, 2020, You can also fax your consent or explanation to 877-477-9485, If we don't hear from you by that time, we'll continue to process the proposed changes to your tax return based on the information we have. If you have a balance due, we'll continue to charge interest and applicable

0883070024
Sep. 10, 2020 LTR 2626C A1
[redacted]1742 201712 30
Input Op: 0883070024 00016391

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

Consent to Tax Increase

I/We consent to the immediate assessment and collection of the increase in tax and penalties as previously shown on the Notice CP2000, plus any interest due. I/We will not be able to contest these changes for the tax periods shown in this letter in the U.S. Tax Court, unless additional tax is determined to be due for this tax period.

Your signature_____ Date _____

Spouse's signature _____ Date_____
(REQUIRED IF YOU FILED A JOINT TAX RETURN)

Your taxpayer identification number _____
Tax periods_____

HGW 295

SBO

IRS Department of the Treasury
Internal Revenue Service
Ogden, UT 84201

Notice Number: CP- 89
Notice Date: Sep. 25, 2020
Taxpayer Identification Number:
xxx-xx-1742

If you have any questions,
please call us at:
1-800-829-8374

015530.952276.141293.31944 1 AB 0.419 862

HERMAN WILLIAMS
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

15530

THIS IS NOT A BILL

Annual Installment Agreement Statement
THIS IS FOR YOUR INFORMATION

This is your Annual Installment Agreement Statement. This two-part statement shows the installment-agreement activity from July 15, 2019 to September 7, 2020 for each tax period included in your agreement.

I. The **Payment Detail** page shows the payments received and where they have been applied.

- Your payments are listed by date received to assist you as you review your records. The payments are also totaled at the end of the detail, for your convenience.
- Your payments have been applied according to the terms of your agreement and in accordance with the law. For each tax year, your payments are applied first to tax, then penalty, then interest, and other charges.

II. The **Installment Agreement Activity** page shows each tax period for which you owed tax.

- The Beginning Balance is calculated as of July 15, 2019, or the date you entered a tax period into an installment agreement, if it was later. The beginning balance of each tax period includes the unpaid tax, penalty, and interest as of this calculation date.
- The Total Interest, Total Penalty and Other Charges are the amounts added during this period. Other Charges are items such as fees, refunds or adjustments.

If you'd like to pay the full amount you owe, please call us at 1-800-829-8374 so we may give you a current payoff figure. Your future statements will be mailed to you annually, for as long as you have installment agreement activity.

As always, we appreciate your timely payments.

HGW 296

IRS Department of the Treasury
Internal Revenue Service

OGDEN UT 84201-0029

015647.955773.164123.32374 1 AB 0.419 864

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

)15647

CUT OUT AND RETURN THE VOUCHER AT THE BOTTOM OF THIS PAGE IF YOU ARE MAKING A PAYMENT, EVEN IF YOU ALSO HAVE AN INQUIRY.

The IRS address must appear in the window.

0477351336

BODCD-SB

Use for payments

Letter Number: LTR0681C
Letter Date : 2020-10-02
Tax Period : 201712

105661742

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

INTERNAL REVENUE SERVICE

OGDEN UT 84201-0029

105661742 YP WILL 30 0 201712 670 00000000000 HGW 297

IRS Department of the Treasury
Internal Revenue Service

OGDEN UT 84201-0029

015648.955773.164123.32374 2 AB 0.419 1190

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

15648

CUT OUT AND RETURN THE VOUCHER AT THE BOTTOM OF THIS PAGE IF YOU ARE MAKING A PAYMENT, EVEN IF YOU ALSO HAVE AN INQUIRY.

The IRS address must appear in the window.

0477351336

BODCD-SB

Use for payments

Letter Number: LTR2273C
Letter Date : 2020-10-02
Tax Period : 201612

105661742

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

INTERNAL REVENUE SERVICE

OGDEN UT 84201-0029

105661742 YP WILL 30 0 201612 670 00000000000

HGW 298

IRS Department of the Treasury
Internal Revenue Service

OGDEN UT 84201-0029

In reply refer to: 0477351336
Oct. 02, 2020 LTR 2273C 0
[redacted]1742 201612 30
00017596
BODC: SB

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

)15648

Taxpayer identification number: [redacted]1742
Forms: 1040
Tax periods: Dec. 31, 2016

Dear Taxpayer:

We processed your installment agreement for the tax periods listed at the top of this letter. Your monthly payment of $25.00 is due on the 28th of each month, beginning on Oct. 28, 2020.

WHAT YOU NEED TO KNOW ABOUT YOUR INSTALLMENT AGREEMENT

We charge a $43.00 user fee to cover the cost of processing an installment agreement. We deduct the fee from your first payment. Your first payment must be at least $43.00 to cover the user fee, even though your approved installment agreement payments may be less.

If your adjusted gross income for the most recent year is at or below 250% of the federal poverty guidelines (low-income taxpayer) as shown in the Low-Income Taxpayer Adjusted Gross Income Guidance table on Form 13844, Application for Reduced User Fee For Installment Agreements, then the user fee is reduced to $43.00.

On February 9, 2018, the President signed the Bipartisan Budget Act of 2018 (Act) into law, which amended Internal Revenue Code Section 6159. The Act limits user fees for installment agreements entered into on or after April 10, 2018. We'll waive or reimburse the reduced installment agreement user fee if you're a low-income taxpayer for installment agreement user fee purposes and meet certain requirements.

We won't increase installment agreement user fees above the amounts that were effective as of February 9, 2018. However, based on a user fee cost review we conduct every two years, we may lower the fees periodically.

Even if you meet the requirements for low-income taxpayer status, you

HGW 299

0477351336
Oct. 02, 2020 LTR 2273C 0
[redacted]1742 201612 30
00017598

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

15648

We'll send you a monthly statement with a payment voucher and return envelope shortly before each payment is due. The statement will show your remaining balance and your monthly payment amount. We must receive your payment by the due date. If you don't receive your statement at least 10 days before your payment due date, you should mail us your payment with a copy of the last page of this letter.

If you send payments by mail, make your check or money order payable to the United States Treasury and provide on each payment your:

- Name
- Address
- Taxpayer identification number
- Daytime telephone number
- Tax period
- Tax form

Please use the return envelope provided with your statement.

Any time you can afford to pay more than the required payment amount, you should do so. Extra payments help you avoid additional penalty and interest charges on the amount you still owe.

If your address changes, send a completed:
- Form 8822, Change of Address, to the address on page 2 of that form for individual changes, or
- Form 8822-B, Change of Address or Responsible Party - Business, to the address on page 1 of that form for business changes.

We'll apply any refunds you're due to the amount you owe until you pay your balance due in full. A refund offset isn't a substitute for a monthly payment. You must still make your regular monthly payment if we apply a refund to your account.

You must timely file all required federal tax returns.

HOW TO PAY THE TAX YOU OWE

You can send your payments by mail each month or use one of several other payment options.

Pay in person

You can pay at a local IRS office by personal check, cashier's check, certified check, or money order. When you pay in person, be sure to bring this letter with you. Some offices also accept cash (but they

0477351336
Oct. 02, 2020 LTR 2273C 0
[redacted]1742 201612 30
00017600

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

015648

Sincerely yours,

L Duquette

Lucy Duquette
Operations Manager, ACS

Enclosures:
Envelope

HGW 301

IRS Department of the Treasury
Internal Revenue Service

OGDEN UT 84201-0029

In reply refer to: 0477351336
Oct. 02, 2020 LTR 681C 0
[redacted]1742 201712 30
00010297
BODC: SB

HERMAN G & NADINE A WILLIAMS JR
5321 CHINO HEIGHTS ST
N LAS VEGAS NV 89081-2970

15647

Dear Taxpayer:

Thank you for your inquiry of June 29, 2020.

We accept your proposal to pay the amount you owe by Oct. 27, 2020. Please note: We may levy any state income tax refunds of yours that become available during the extended time to pay, and apply them to your outstanding balance (subject to any Collection Due Process rights).

The current balance due for the tax periods shown above is $43,659.83, which includes interest and applicable penalties figured to Oct. 27, 2020. We'll continue to charge interest and applicable penalties until you pay the balance due in full.

We updated your account to reflect this agreement.

If you have questions, you can call 800-829-3903.

If you are out of the country and need assistance, please call us at +1-267-941-1000. (This is not a toll free number.)

You can also find more information on our website at www.irs.gov.

You can get any of the forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX FORM (800-829-3676).

When you write, include a copy of this letter, and provide your telephone number and the hours we can reach you in the spaces below.

Telephone number ( )_____ Hours _____

Keep a copy of this letter for your records.

Thank you for your cooperation.

HGW 302

AMERICA FIRST CREDIT UNION

STATEMENT

America First Federal Credit Union · 1-800-999-3961 · americafirst.com
P.O. Box 9199, Ogden, UT 84409

#BWNCHFQ
#847EXQU1006393374#
EXQUISITE TOWING ROADSIDE ASSISTANCE LLC
4018 ADABELLA AVE APT 204
LAS VEGAS NV 89115

Statement Date: February 29, 2020
Account Number: [redacted]374-8

fyi — for your information

America First is your place for home loans. Whether you're looking to build, buy, or refinance, our outstanding selection of mortgage & home equity solutions can help get you the cash you need to make your place home. Apply today at your neighborhood branch or **americafirst.com**.

A Summary of Your Accounts

	Ending Balance	2020 Dividends
Share Savings	802.00	0.00
Checking	411.96	0.00
Total:	**1,213.96**	**0.00**

A Summary of Your Loans

Ending Balance	Total Amount Due	Next Payment	2020 Interest

Share Savings

Statement Period: February 01, 2020 - February 29, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
		BEGINNING BALANCE		2.00
02/28		ONLINE BANKING SHARE TRANSFER FROM CHECKING	800.00	802.00
		ENDING BALANCE		802.00

Checking

Statement Period: February 01, 2020 - February 29, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
		BEGINNING BALANCE			631.64
02/01	01/31	POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		63.66-	567.98
02/01		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		61.16-	506.82
02/01		POINT OF SALE PURCHASE US NV LAS VEGAS, CAMPOUT INC		69.00-	437.82
02/01		POINT OF SALE PURCHASE US NV LAS VEGAS, O'REILLY AUTO PARTS 432		32.50-	405.32
02/01		POINT OF SALE PURCHASE US NV LAS VEGAS, WM SUPERCENTER # WAL-MART SUPER CE		43.11-	362.21
02/01		POINT OF SALE PURCHASE US NV LAS VEGAS, O'REILLY AUTO PARTS 573		32.50-	329.71
02/03	02/02	POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/HER-COLE LLC CHEVRON/HER-C		63.21-	266.50

DEFENDANT'S EXHIBIT JJ 12/11/20 D586291 586291 PENGAD 800-631-6989

SED EXHIBIT

Checking, Continued

Statement Period: February 01, 2020 - February 29, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
02/03	02/02	POINT OF SALE PURCHASE US NV NORTH LAS VEG, HARBOR FREIGHT TOOLS 1515 W CR		4.08-	262.42
02/03	02/02	POINT OF SALE PURCHASE US NV N LAS VEGAS, THE HOME DEPOT #3307		33.33-	229.09
02/03		POINT OF SALE PURCHASE US NV LAS VEGAS, O'REILLY AUTO PARTS 573		7.42-	221.67
02/03		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		190.00	411.67
02/03	02/02	VISA - 01/31 POPEYES LOUISIANA KITCHEN NORTH LAS VEG NV 0		28.17-	383.50
02/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		54.89-	328.61
02/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	278.61
02/04	02/03	VISA - 02/01 MCDONALD'S F21534 LAS VEGAS NV 001198		12.96-	265.65
02/04	02/03	VISA - 02/01 IN *DESERT EYE CARE LAS VEGAS NV 001590		64.95-	150.70
02/04		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		37.33-	113.37
02/05	02/04	POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		58.66-	54.71
02/05		VISA - 02/03 GOHENRY INC 877-3726466 DE 003948		15.96-	38.75
02/05		POINT OF SALE PURCHASE US NV NORTH LAS VEG, 7-ELEVEN 3901 E CRAIG RD		6.98-	31.77
02/05		POINT OF SALE PURCHASE US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		60.50-	28.73
02/06		OVERDRAFT SERVICE FEE		25.00-	53.73
02/06		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		61.16-	114.89
02/07		OVERDRAFT SERVICE FEE		25.00-	139.89
02/07		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,112.00	972.11
02/07		LAS VEGAS CRAIG ROAD DRIVE-UP ATM WITHDRAWAL NV LAS VEGAS, 1225 W CRAIG ROAD		380.00-	592.11
02/07		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		77.65-	514.46
02/08	02/07	POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/SHORT LINE E CHEVRON/SHORT		58.99-	455.47
02/08		VISA - 02/05 CAPRIOTTIS SANDWICH SHOP NORTH LAS VEG NV 00		10.83-	444.64
02/09		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		2.50-	442.14
02/10	02/09	POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		51.99-	390.15
02/10	02/09	POINT OF SALE PURCHASE US NV NORTH LAS VEG, SAMSCLUB #4974 2650 EAST CRAIG		88.08-	302.07
02/10	02/09	POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STATIO 3815 E CR		13.66-	288.41
02/10	02/09	POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		25.00-	263.41
02/10		VISA - 02/07 CAPRIOTTIS SANDWICH SHOP NORTH LAS VEG NV 00		30.53-	232.88
02/10		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	182.88
02/11		POINT OF SALE PURCHASE US NV LAS VEGAS, WM SUPERCENTER # WAL-MART SUPER CE		86.96-	95.92
02/11	02/10	POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	45.92
02/11		VISA - 02/08 JACK IN THE BOX 07228 N LAS VEGAS NV 008841		5.09-	40.83
02/11		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/ETT I, LLC CHEVRON/ETT I,		62.43-	21.60
02/12		OVERDRAFT SERVICE FEE		25.00-	46.60
02/12		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 4919 W SAHAR		4.69-	51.29
02/13		OVERDRAFT SERVICE FEE		25.00-	76.29
02/13		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		7.80-	84.09
		OVERDRAFT SERVICE FEE		25.00-	109.09

AMERICA FIRST CREDIT UNION

STATEMENT

Checking, Continued

Statement Period: February 01, 2020 - February 29, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
02/13		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		61.16-	170.25
02/13		OVERDRAFT SERVICE FEE		25.00-	195.25
		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SPEEDEE MART 126 6625 SPEEDWAY BLV			
02/13		OVERDRAFT SERVICE FEE		8.65-	203.90
02/14		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		25.00-	228.90
02/14		POINT OF SALE PURCHASE		1,228.00	999.10
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL			
02/14		POINT OF SALE PURCHASE		81.16-	917.94
		US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA			
02/14		POINT OF SALE PURCHASE		4.39-	913.55
		US NV LAS VEGAS, STATESIDE EXPRESS 905 N LAS VEGAS			
02/15		POINT OF SALE PURCHASE		9.96-	903.59
		US NV LAS VEGAS, WIRELESS TOYZ 153 2415 S EASTERN A			
02/15		POINT OF SALE PURCHASE		153.00-	750.59
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL			
02/18	02/16	POINT OF SALE PURCHASE		52.50-	698.09
		US NV LAS VEGAS, LIDS 5860 7400 LAS VEGAS BLV			
02/18	02/16	STAR NETWORK ATM WITHDRAWAL		58.50-	639.59
		US NV LAS VEGAS, 4421 E BONANZA ROA			
02/18	02/16	NON-AFCU ATM TRANSACTION FEE		104.00-	535.59
02/18	02/16	POINT OF SALE PURCHASE		1.50-	534.09
		US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA			
02/18	02/16	POINT OF SALE PURCHASE		8.77-	525.32
		US NV NORTH LAS VEG, WAL-MART #2592 1807 W CRAIG RD			
02/16	02/16	POINT OF SALE PURCHASE		23.54-	501.78
		US NV NORTH LAS VEG, BURLINGTON STORES 1001			
02/18	02/17	POINT OF SALE PURCHASE		37.90-	463.88
		US NV LAS VEGAS, BEST BUY #289 3820 S. MARYLAND P			
02/18	02/17	POINT OF SALE PURCHASE		45.51-	418.37
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL			
02/18	02/17	POINT OF SALE PURCHASE		50.00-	368.37
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL			
02/18	02/17	VISA - 02/16 TALKINGPARENTS.COM 888-896-7936 FL 016324		58.77-	309.60
02/18	02/16	VISA - 02/14 LVTICKETATTORNEY LAS VEGAS NV 014639		5.99-	303.61
02/18	02/16	VISA - 02/15 SPRINT *WIRELESS 800-639-6111 KS 015691		250.00-	53.61
02/18	02/16	OVERDRAFT SERVICE FEE		281.86-	228.25
02/18		POINT OF SALE PURCHASE		25.00-	253.25
		US NV LAS VEGAS, FINISH-LINE #035 4300 M			
02/18		OVERDRAFT SERVICE FEE		140.89-	394.14
02/18		POINT OF SALE PURCHASE		25.00-	419.14
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL			
02/18		OVERDRAFT SERVICE FEE		63.16-	482.30
02/19	02/18	VISA PURCHASE RETURN - 02/17		25.00-	507.30
		BEST BUY 00010447 LAS VEGAS NV 017127			
02/19		POINT OF SALE PURCHASE		2.17	505.13
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL			
02/19		OVERDRAFT SERVICE FEE		61.27-	566.40
02/20		POINT OF SALE PURCHASE		25.00-	591.40
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R			
02/20		OVERDRAFT SERVICE FEE		50.00-	641.40
02/21		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		25.00-	666.40
02/21		POINT OF SALE PURCHASE		1,758.00	1,091.60
		US NV LAS VEGAS, SPEEDEE MART 116 6703 W ALEXANDER			
02/21		POINT OF SALE PURCHASE		70.00-	1,021.60
		US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA			
02/21		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		8.77-	1,012.83
02/21		NON-AFCU ATM TRANSACTION FEE		203.00-	809.83
02/21		POINT OF SALE PURCHASE		1.50-	808.33
		US NV LAS VEGAS, STATESIDE EXPRESS 905 N LAS VEGAS		62.50-	745.83

HGW 305

Checking, Continued

Statement Period: February 01, 2020 - February 29, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
02/22		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		11.27-	734.56
02/22		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, WM SUPERCENTER # WAL-MART SUPER CE		16.13-	718.43
02/22		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, WM SUPERCENTER # WAL-MART SUPER CE		11.89-	706.54
02/24	02/23	VISA - 02/21 ALLSTATE *PAYMENT 800-255-7828 IL 021439		141.23-	565.31
02/24	02/23	VISA - 02/22 COX LAS VEGAS COMM SV 800-234-3993 NV 022593		188.07-	377.24
02/24	02/23	VISA - 02/21 HALF PRICE LAWYER 702-3822000 NV 021275		250.00-	127.24
02/24		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		58.77-	68.47
02/24		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	18.47
02/25	02/24	VISA - 02/22 CAPRIOTTIS SANDWICH SHOP NORTH LAS VEG NV 02		11.04-	7.43
02/25		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		70.00-	62.57
02/25		OVERDRAFT SERVICE FEE		25.00-	87.57
02/25		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	137.57
02/25		OVERDRAFT SERVICE FEE		25.00-	162.57
02/27		COURTESY REBATE		50.00	112.57-
02/28		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,463.00	1,350.43
02/28		ONLINE BANKING FUNDS TRANSFER TO SHARE SAVINGS		800.00-	550.43
02/28		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		61.87-	488.56
02/26		POINT OF SALE PURCHASE			
		US NV N LAS VEGAS, WAL-MART SUPER CENTE 4339 WAL-SA		76.60-	411.96
		ENDING BALANCE			411.96

Checking Summary

Item	Amount		Item	Amount		Item	Amount		Item	Amount
VISA	28.17	:	VISA	15.96	:	VISA	250.00	:	VISA	250.00
VISA	54.89	:	VISA	10.83	:	VISA	281.86	:	VISA	11.04
VISA	12.96	:	VISA	30.53	:	VISA	5.99	:	VISA	188.07
VISA	64.95	:	VISA	5.09	:	VISA	141.23	:	VISACR	2.17CR

Total Checks and Visa Checking: 1,351.57 **Total Withdrawals:** 4,671.28 **Total Deposits:** 5,803.17

AMERICA FIRST CREDIT UNION

STATEMENT

America First Federal Credit Union · 1-800-999-3961 · americafirst.com
P.O. Box 9199, Ogden, UT 84409

#BWNCHFQ
#847EXQUI00639337#
EXQUISITE TOWING ROADSIDE ASSISTANCE LLC
4018 ADABELLA AVE APT 204
LAS VEGAS NV 89115

Statement Date: March 31, 2020
Account Number: [redacted]374-8

fyi — for your information

The world has changed with COVID-19, but America First's commitment to serving our members remains the same. Please contact us via online banking at **americafirst.com** or call 1-800-999-3961 and we'll do everything possible to help get you through these unprecedented times.

A Summary of Your Accounts

	Ending Balance	2020 Dividends
Share Savings	971.04	0.04
Checking	133.16	0.00
Total:	1,104.20	0.04

A Summary of Your Loans

	Ending Balance	Total Amount Due	Next Payment	2020 Interest

Share Savings

Statement Period: March 01, 2020 - March 31, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
		BEGINNING BALANCE		802.00
03/06		SHARE TRANSFER FROM CHECKING	500.00	1,302.00
03/06		ONLINE BANKING SHARE TRANSFER TO CHECKING	1,281.00-	21.00
03/13		SHARE TRANSFER FROM CHECKING	500.00	521.00
03/18		SHARE TRANSFER TO CHECKING	400.00-	121.00
03/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	71.00
03/20		SHARE TRANSFER FROM CHECKING	500.00	571.00
03/25		SHARE TRANSFER TO CHECKING	100.00-	471.00
03/27		SHARE TRANSFER FROM CHECKING	500.00	971.00
03/31	04/01	DIVIDEND EARNED FOR PERIOD OF 03/01/2020 THROUGH 03/31/2020		
		ANNUAL PERCENTAGE YIELD EARNED IS 0.09%	.04	971.04
		ENDING BALANCE		971.04

Checking

Statement Period: March 01, 2020 - March 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
		BEGINNING BALANCE			411.96
03/01		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		59.37-	352.59
03/01		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		63.00-	289.59
03/01		NON-AFCU ATM TRANSACTION FEE		1.50-	288.09
03/02		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		271.00	559.09

HGW 307

AMERICA FIRST CREDIT UNION

STATEMENT

Checking, Continued

Statement Period: March 01, 2020 - March 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
03/02	02/29	VISA - 02/28 CASH APP*HERMAN 8774174551 CA 028084		5.00-	554.09
03/02	02/29	VISA - 02/28 CASH AMERICA #2006 702-4773040 NV 028177		105.13-	448.96
03/02		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		63.16-	385.80
03/03	03/02	POINT OF SALE PURCHASE US NV NORTH LAS VEG, WALGREENS STORE 1445 W		4.00-	381.80
03/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	331.80
03/03	03/02	VISA - 03/01 SQ *LUPITAS FURNITU LAS VEGAS NV 001923		100.00-	231.80
03/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		6.22-	225.58
03/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		57.69-	167.89
03/04		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	117.89
03/05	03/04	VISA - 03/02 CAPRIOTTIS SANDWICH SHOP NORTH LAS VEG NV 00		9.20-	108.69
03/05	03/04	VISA - 03/03 GOHENRY INC 877-3726466 DE 003364		15.96-	92.73
03/05		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		3.29-	89.44
03/05		POINT OF SALE PURCHASE US NV NORTH LAS VEG, LOWE'S #2721		2.12-	87.32
03/05		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SAMSCLUB #4974 2650 EAST CRAIG		50.35-	36.97
03/05		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		2.50-	34.47
03/06		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,083.00	1,117.47
03/06		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	617.47
03/06		ONLINE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		1,281.00	1,898.47
03/06		MONEY ORDER 135104608		1,000.00-	898.47
03/06		MONEY ORDER FEE		.75-	897.72
03/06		MONEY ORDER 135104610		620.00-	277.72
03/06		MONEY ORDER FEE		.75-	276.97
03/06		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		54.08-	222.89
03/06		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		4.39-	218.50
03/06		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		14.65-	203.85
03/06		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		57.19-	146.66
03/09	03/08	VISA - 03/05 STARBUCKS STORE 09274 NORTH LAS VEG NV 00518		4.47-	142.19
03/09	03/08	VISA - 03/07 SAMSUNG ELECTRONICS 650-9345824 NJ 006455		4.99-	137.20
03/09	03/08	VISA - 03/07 SAMSUNG ELECTRONICS 650-9345824 NJ 006060		9.99-	127.21
03/09	03/08	VISA - 03/07 SAMSUNG ELECTRONICS 650-9345824 NJ 006109		9.99-	117.22
03/09	03/08	VISA - 03/06 LEGAL SERVICES LAS VEGAS NV 006998		200.00-	82.78
03/09	03/08	OVERDRAFT SERVICE FEE		25.00-	107.78
03/13		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,446.00	1,338.22
03/13		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	838.22
03/13		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		69.06-	769.16
03/13		POINT OF SALE PURCHASE US NV LAS VEGAS, WM SUPERCENTER # WAL-MART STORE		134.09-	635.07
03/14		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	585.07
03/14		POINT OF SALE PURCHASE US NV LAS VEGAS, METRO PCS		153.00-	432.07
03/16	03/15	STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		83.00-	349.07
03/16	03/15	NON-AFCU ATM TRANSACTION FEE		1.50-	347.57
03/16	03/15	POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		3.98-	343.59
03/16	03/15	POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	293.59
03/16	03/15	POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		8.77-	284.82

HGW 308

1200

Checking, Continued

Statement Period: March 01, 2020 - March 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
03/16	03/15	POINT OF SALE PURCHASE US NV LAS VEGAS, LLANTERA TROPICANA		255.68-	29.14
03/16	03/15	VISA - 03/13 CHEVRON 0209891 LAS VEGAS NV 013278		59.65-	30.51
03/16	03/15	OVERDRAFT SERVICE FEE		25.00-	55.51
03/16		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		52.50-	108.01
03/16		OVERDRAFT SERVICE FEE		25.00-	133.01
03/18	03/17	VISA - 03/16 CASH APP*HERMAN 8774174551 CA 016082		2.00-	135.01
03/18	03/17	OVERDRAFT SERVICE FEE		25.00-	160.01
03/18	03/17	VISA - 03/16 TALKINGPARENTS.COM 888-896-7936 FL 016608		5.99-	166.00
03/18	03/17	OVERDRAFT SERVICE FEE		25.00-	191.00
03/18		COURTESY REBATE		75.00	116.00
03/18		FUNDS TRANSFER FROM SHARE SAVINGS		400.00	284.00
03/19	03/18	VISA - 03/17 SPRINT *WIRELESS 800-639-6111 KS 017401		277.45-	6.55
03/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	56.55
03/19		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		11.27-	45.28
03/19		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		5.67-	39.61
03/20		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,626.00	1,665.61
03/20		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	1,165.61
03/20		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		61.27-	1,104.34
03/20		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		16.62-	1,087.72
03/20		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		15.75-	1,071.97
03/21		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	1,021.97
03/21		POINT OF SALE PURCHASE US NV LAS VEGAS, WM SUPERCENTER # WAL-MART SUPER CE		48.17-	973.80
03/21		POINT OF SALE PURCHASE US NV LAS VEGAS (N), WM SUPERCENTER # WAL-MART SUPE		74.47-	899.33
03/21		POINT OF SALE PURCHASE US NV LAS VEGAS, O'REILLY AUTO PARTS 573		102.86-	796.47
03/21		POINT OF SALE PURCHASE US NV LAS VEGAS, O'REILLY AUTO PARTS 573		5.42-	791.05
03/23	03/22	POINT OF SALE PURCHASE US NV LAS VEGAS (N), WAL-MART SUPER CENTE 2592 WAL-		18.65-	772.40
03/23	03/22	VISA - 03/20 CAPRIOTTIS SANDWICH SHOP NORTH LAS VEG NV 02		11.37-	761.03
03/23	03/22	VISA - 03/20 ALLSTATE *PAYMENT 800-255-7828 IL 020149		170.09-	590.94
03/23	03/22	VISA - 03/20 LEGAL SERVICES LAS VEGAS NV 020514		200.00-	390.94
03/23		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL		58.77-	332.17
03/23		STAR NETWORK ATM WITHDRAWAL US NV NORTH LAS VEG, 4240 E. CRAIG ROAD		43.50-	288.67
03/23		NON-AFCU ATM TRANSACTION FEE		1.50-	287.17
03/23		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO 5100 NORTH LA		15.66-	271.51
03/24	03/23	VISA - 03/21 CAPRIOTTIS SANDWICH SHOP NORTH LAS VEG NV 02		11.37-	260.14
03/24	03/23	VISA - 03/21 RESTAURANT DEPOT LAS VEGAS NV 021938		110.74-	149.40
03/24		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	99.40
03/25	03/24	VISA - 03/23 CRT*CREDIT.COMCREDITRPT 800-7569684 CA 02378		4.95-	94.45
03/25		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	44.45
03/25		FUNDS TRANSFER FROM SHARE SAVINGS		100.00	144.45
03/25		POINT OF SALE PURCHASE US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		11.87-	132.58
03/26	03/25	VISA - 03/24 COX LAS VEGAS COMM SV 800-234-3993 NV 024872		89.00-	43.58
03/27		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,353.00	1,396.58
03/27		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	896.58

Checking, Continued

Statement Period: March 01, 2020 - March 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
03/27		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		58.77-	837.81
03/27		POINT OF SALE PURCHASE			
		US NV LAS VEGAS (N), WM SUPERCENTER # WAL-MART SUPE		30.36-	807.45
03/27		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL		50.00-	757.45
03/28		POINT OF SALE PURCHASE			
		US NV N LAS VEGAS, PEPBOYS STORE # 683 2030 N LAS V		68.27-	689.18
03/28		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, WAL-MART SUPER CENTE 2483 WAL-SAMS		48.64-	640.54
03/30	03/29	VISA - 03/27 B AND J BODY SHOP BOULDER CITY NV 027785		216.75-	423.79
03/30		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		58.77-	365.02
03/30		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SMITHS #4301 3013 W CRAIG RD		66.75-	298.27
03/30		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, WAL-MART #2592 1807 W CRAIG RD		65.11-	233.16
03/31		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	183.16
03/31		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL		50.00-	133.16
		ENDING BALANCE			133.16

Checking Summary

Item	Amount	Item	Amount	Item	Amount	Item	Amount
VISA	5.00	VISA	200.00	VISA	5.99	VISA	110.74
VISA	105.13	VISA	4.99	VISA	277.45	VISA	4.95
VISA	100.00	VISA	9.99	VISA	11.37	VISA	89.00
VISA	9.20	VISA	9.99	VISA	170.09	VISA	216.75
VISA	15.96	VISA	59.65	VISA	200.00		
VISA	4.47	VISA	2.00	VISA	11.37		

Total Checks and Visa Checking: 1,624.09 **Total Withdrawals: 6,339.71** **Total Deposits: 7,685.00**

AMERICA FIRST CREDIT UNION

STATEMENT

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P.O. Box 9199, Ogden, UT 84409

#BWNCHFQ
#847EXQUI006393337#
EXQUISITE TOWING ROADSIDE ASSISTANCE LLC
5321 CHINO HEIGHTS ST
NORTE LAS VEGAS NV 89081

Statement Date: July 31, 2020
Account Number: [redacted]3748

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A Summary of Your Accounts

	Ending Balance	2020 Dividends
Share Savings	751.91	0.29
Checking	1,332.47	0.00
Total:	**2,084.38**	**0.29**

A Summary of Your Loans

	Ending Balance	Total Amount Due	Next Payment	2020 Interest

Share Savings

Statement Period: July 01, 2020 - July 31, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
		BEGINNING BALANCE		731.87
07/01	06/30	MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	852.87
07/01		MOBILE BANKING SHARE TRANSFER FROM CHECKING	600.00	1,452.87
07/02		DEPOSIT	350.00	1,652.87
07/02		OFFICIAL CHECK 135038585 TO COSTELLO REALTY & MANAGEMENT	1,475.00-	177.87
07/10		SHARE TRANSFER FROM CHECKING	500.00	677.87
07/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	647.87
07/15	07/14	MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	577.87
07/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	477.87
07/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	277.87
07/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	46.00-	231.87
07/17		SHARE TRANSFER FROM CHECKING	500.00	731.87
07/18		MOBILE BANKING SHARE TRANSFER TO CHECKING	150.00-	581.87
07/20	07/19	MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	531.87
07/20		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	501.87
07/20		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	451.87
07/21		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	391.87
07/22		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	331.87
07/22		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	281.87
07/23		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	231.87
07/23		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	201.87
07/24	07/23	MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	151.87
07/24	07/23	MOBILE BANKING SHARE TRANSFER TO CHECKING	20.00-	131.87
07/24		SHARE TRANSFER FROM CHECKING	500.00	631.87
07/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	90.00-	541.87

Share Savings, Continued

Statement Period: July 01, 2020 - July 31, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
07/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	451.87
07/30		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	351.87
07/30		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	251.87
07/31		SHARE TRANSFER FROM CHECKING	500.00	751.87
07/31	08/01	DIVIDEND EARNED FOR PERIOD OF 07/01/2020 THROUGH 07/31/2020		
		ANNUAL PERCENTAGE YIELD EARNED IS 0.10%	.04	751.91
		ENDING BALANCE		751.91

Checking

Statement Period: July 01, 2020 - July 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
		BEGINNING BALANCE			174.67
07/01	06/30	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	204.67
07/01	06/30	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, WAL-MART #2592 1807 W CRAIG RD		87.26-	117.41
07/01	06/30	POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		9.99-	107.42
07/01		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		735.00	842.42
07/01	06/30	VISA - 06/30 MICROSOFT*XBOX REDMOND WA 029689		9.99-	832.43
07/01		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		500.00-	332.43
07/01		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		61.42-	271.01
07/01		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		4.39-	266.62
07/02	07/01	VISA - 06/29 STARBUCKS STORE 10394 LAS VEGAS NV 029407		31.54-	235.08
07/02	07/01	VISA - 06/30 ALLSTATE *PAYMENT 800-255-7828 IL 030067		127.48-	107.60
07/02		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATION		40.00-	67.60
07/02		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATION		50.00-	17.60
07/03		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		385.00	402.60
07/03		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATION		8.92-	393.68
07/06	07/04	POINT OF SALE PURCHASE US NV N LAS VEGAS, MORTON'S		8.39-	385.29
07/06	07/04	POINT OF SALE PURCHASE			
		US NV LAS VEGAS, ARCO #42270 4380 N LAMB B		13.45-	371.84
07/06	07/05	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, HARBOR FREIGHT TOOLS 1515 W CR		32.81-	339.03
07/06	07/05	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, 7-ELEVEN 5180 LOSEE ROAD		2.04-	336.99
07/06	07/05	POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CARDENAS MARKET #26 4421 E BONANZA		20.00-	316.99
07/06	07/05	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATION		58.92-	258.07
07/06	07/05	VISA - 07/03 MCDONALD'S F35219 NORTH LAS VEG NV 003679		23.69-	234.38
07/06	07/05	VISA - 07/03 CHEVRON 0209891 LAS VEGAS NV 003280		50.00-	184.38
07/06	07/05	VISA - 07/03 SHELL OIL 57442053906 LAS VEGAS NV 003344		65.00-	119.38
07/06		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATION		2.50-	116.88
07/08		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		50.00-	66.88
07/09		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		50.00-	16.88
07/10		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		747.00	763.88
07/10	07/09	VISA - 07/08 MICROSOFT*XBOX REDMOND WA 008816		4.99-	758.89
07/10		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	258.89
07/10		VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE I --		14.99-	243.90
07/11	07/10	VISA - 07/09 MICROSOFT*XBOX REDMOND WA 009277		9.99-	233.91
07/13	07/12	POINT OF SALE PURCHASE US NV N LAS VEGAS, THE HOME DEPOT #3307		53.53-	180.38
07/13		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		52.50-	127.88
07/13		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, O'REILLY AUTO PARTS 573		54.18-	73.70
07/13		POINT OF SALE PURCHASE			
		US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		9.99-	63.71

Checking, Continued

Statement Period: July 01, 2020 - July 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
07/14		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		9.99-	53.72
07/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	103.72
07/14		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		50.00-	53.72
07/15	07/14	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	103.72
07/15		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		50.00-	53.72
07/15	07/14	VISA - 07/14 MICROSOFT*XBOX REDMOND WA 013757		9.99-	43.73
07/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	143.73
07/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	343.73
07/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		46.00	389.73
07/16		POINT OF SALE PURCHASE US NV LAS VEGAS, CARQUEST 7789		246.06-	143.67
07/17		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,047.00	1,190.67
07/17		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	690.67
07/18	07/17	VISA - 07/16 HARBOR FREIGHT TOOLS 568 NORTH LAS VEG NV 01		97.53-	593.14
07/18		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		150.00	743.14
07/18		POINT OF SALE PURCHASE US NV N LAS VEGAS, TED WIENS TIRE & AUT 5720 ABVILL		609.95-	133.19
07/18		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		50.00-	83.19
07/18		POINT OF SALE PURCHASE US NV LAS VEGAS, METRO PCS		50.00-	33.19
07/20	07/19	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	83.19
07/20	07/19	POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		50.00-	33.19
07/20	07/19	VISA - 07/18 MICROSOFT*XBOX REDMOND WA 018192		9.99-	23.20
07/20	07/19	VISA - 07/18 MICROSOFT*XBOX REDMOND WA 018212		9.99-	13.21
07/20		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	43.21
07/20		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/COYOTE INVES 6011 BOLLINGE		13.36-	29.85
07/20		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	79.85
07/20		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		50.00-	29.85
07/20		VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	14.86
07/21		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	74.86
07/21		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATION		58.92-	15.94
07/21		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		9.99-	5.95
07/22		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	65.95
07/22		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	15.95
07/22		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	65.95
07/22		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	15.95
07/23	07/22	VISA - 07/22 MICROSOFT*XBOX REDMOND WA 021804		9.99-	5.96
07/23		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	55.96
07/23		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	85.96
07/23		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		50.00-	35.96
07/23		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		23.00-	12.96
07/23		NON-AFCU ATM TRANSACTION FEE		1.50-	11.46
07/24	07/23	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	61.46
07/24	07/23	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		20.00	81.46
07/24		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,201.00	1,282.46
07/24		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	782.46
07/24		POINT OF SALE PURCHASE US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		9.99-	772.47
07/24		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		83.00-	689.47
07/24		NON-AFCU ATM TRANSACTION FEE		1.50-	687.97
07/24		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		58.92-	629.05
07/25		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIC SHELL SERVICE		50.00-	579.05
07/27	07/26	POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		15.00-	564.05
07/27	07/26	VISA - 07/23 MCDONALD'S F25614 LAS VEGAS NV 923355		9.30-	554.75
07/27	07/26	VISA - 07/24 MICROSOFT*XBOX 142-56816830 WA 024070		9.99-	544.76
07/27	07/26	VISA - 07/24 MICROSOFT*XBOX REDMOND WA 024679		9.99-	534.77
07/27	07/26	VISA - 07/24 MCDONALD'S F13323 NORTH LAS VEG NV 024831		38.18-	496.59

Checking, Continued

Statement Period: July 01, 2020 - July 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
07/27		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		58.92-	437.67
07/28		POINT OF SALE PURCHASE			
		US NV N. LAS VEGAS, BURGER KING #8761 Q 3831 E CRA		8.12-	429.55
07/28	07/27	POINT OF SALE PURCHASE			
		US NV HENDERSON, SPEEDEE MART 128 880 E SUNSET RD		60.28-	369.27
07/28		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		61.42-	307.85
07/29		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		11.28-	296.57
07/29	07/28	VISA - 07/27 ALLSTATE *PAYMENT 800-255-7828 IL 026025		135.18-	161.39
07/29		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		61.42-	99.97
07/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	199.97
07/29		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, ZUMIEZ #141 ZUMIEZ #141		15.12-	184.85
07/29		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, LIDS 5191 4300 MEADOWS MALL		58.50-	126.35
07/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	206.35
07/29		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		73.78-	132.57
07/30	07/29	VISA - 07/27 SHELL OIL 57442053906 LAS VEGAS NV 027729		5.50-	127.07
07/30	07/29	VISA - 07/27 MCDONALD'S F35219 NORTH LAS VEG NV 027544		13.73-	113.34
07/30	07/29	VISA - 07/29 AMZN MKTP US*MV35J5UI0 AMZN.COM/BILL WA 0286		22.72-	90.62
07/30	07/29	VISA - 07/28 CRYSTAL PALACE SKATING LAS VEGAS NV 028393		28.00-	62.62
07/30		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	162.62
07/30		POINT OF SALE PURCHASE			
		US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		11.99-	150.63
07/30		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	250.63
07/30		WITHDRAWAL		100.00-	150.63
07/31		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,812.00	1,962.63
07/31	07/30	VISA - 07/30 MICROSOFT*XBOX REDMOND WA 029369		4.99-	1,957.64
07/31	07/30	VISA - 07/30 MICROSOFT*XBOX REDMOND WA 029931		4.99-	1,952.65
07/31		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	1,452.65
07/31		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, 7-ELEVEN 1200 N TOWN CENTER		11.19-	1,441.46
07/31		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		52.50-	1,388.96
07/31		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		56.49-	1,332.47
		ENDING BALANCE			1,332.47

Checking Summary

Item	Amount	Item	Amount	Item	Amount	Item	Amount
VISA	31.54	VISA	9.99	VISA	9.99	VISA	135.18
VISA	9.99	VISA	14.99	VISA	9.30	VISA	28.00
VISA	127.48	VISA	14.99	VISA	9.99	VISA	22.72
VISA	23.69	VISA	9.99	VISA	9.99	VISA	4.99
VISA	50.00	VISA	97.53	VISA	38.18	VISA	4.99
VISA	65.00	VISA	9.99	VISA	5.50		
VISA	4.99	VISA	9.99	VISA	13.73		

Total Checks and Visa Checking: 772.72 **Total Withdrawals:** 5,452.48 **Total Deposits:** 7,383.00

AMERICA FIRST
CREDIT UNION

STATEMENT

America First Federal Credit Union · 1-800-999-3961 · americafirst.com
P.O. Box 9199, Ogden, UT 84409

#BWNCHFQ
#847EXQUI006393371
EXQUISITE TOWING ROADSIDE ASSISTANCE LLC
5321 CHINO HEIGHTS ST
NORTH LAS VEGAS NV 89081

Statement Date: August 31, 2020
Account Number: [redacted]3748

Page Number 1 of 7

fyi — for your information

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A Summary of Your Accounts

	Ending Balance	2020 Dividends
Share Savings	741.98	0.36
Checking	378.29	0.00
Total:	1,120.27	0.36

A Summary of Your Loans

	Ending Balance	Total Amount Due	Next Payment	2020 Interest

Share Savings

Statement Period: August 01, 2020 - August 31, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
		BEGINNING BALANCE		751.2.
08/03		MOBILE BANKING SHARE TRANSFER FROM CHECKING	1,000.00	1,751.91
08/03		DEPOSIT	350.00	2,101.91
08/03		OFFICIAL CHECK 135039346 TO COSTELLO REALTY & MANAGEMENT	1,425.00-	676.91
08/04		MOBILE BANKING SHARE TRANSFER TO CHECKING	240.00-	436.91
08/05		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	336.91
08/05		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	276.91
08/06		MOBILE BANKING SHARE TRANSFER TO CHECKING	40.00-	236.91
08/06		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	186.91
08/07		SHARE TRANSFER FROM CHECKING	500.00	686.91
08/07		MOBILE BANKING SHARE TRANSFER FROM CHECKING	3,400.00	4,086.91
08/07		MOBILE BANKING SHARE TRANSFER TO CHECKING	1,000.00-	3,086.91
08/07		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	2,986.91
08/10		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	2,926.91
08/10		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	2,846.91
08/11		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	2,786.91
08/12		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	2,686.91
08/12		MOBILE BANKING SHARE TRANSFER TO CHECKING	300.00-	2,386.91
08/14		SHARE TRANSFER FROM CHECKING	500.00	2,886.91
08/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	1,000.00-	1,886.91
08/15		MOBILE BANKING SHARE TRANSFER TO CHECKING	300.00-	1,586.91
08/15		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,486.91

Share Savings, Continued

Statement Period: August 01, 2020 - August 31, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
08/15		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	1,406.91
08/15		MOBILE BANKING SHARE TRANSFER TO CHECKING	65.00-	1,341.91
08/17	08/16	MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,241.91
08/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,141.91
08/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	941.91
08/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	600.00-	341.91
08/20		MOBILE BANKING SHARE TRANSFER TO CHECKING	40.00-	301.91
08/21		SHARE TRANSFER FROM CHECKING	500.00	801.91
08/24	08/23	MOBILE BANKING SHARE TRANSFER TO CHECKING	150.00-	651.91
08/24		MOBILE BANKING SHARE TRANSFER TO CHECKING	120.00-	531.91
08/25		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	451.91
08/25		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	421.91
08/26		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	361.91
08/27		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	301.91
08/27		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	241.91
08/28		SHARE TRANSFER FROM CHECKING	500.00	741.91
08/31	09/01	DIVIDEND EARNED FOR PERIOD OF 08/01/2020 THROUGH 08/31/2020		
		ANNUAL PERCENTAGE YIELD EARNED IS 0.05%	.07	741.98
		ENDING BALANCE		741.98

Checking

Statement Period: August 01, 2020 - August 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
		BEGINNING BALANCE			1,332.47
08/01	07/31	VISA - 07/29 AUNTIE ANNE'S - CINNAB LAS VEGAS NV 029011		8.76-	1,323.71
08/01	07/31	VISA - 07/31 MICROSOFT*XBOX REDMOND WA 030235		9.99-	1,313.72
08/01	07/31	VISA - 07/30 MICROSOFT*XBOX REDMOND WA 030885		9.99-	1,303.73
08/01	07/31	VISA - 07/31 MICROSOFT*XBOX REDMOND WA 030182		11.99-	1,291.74
08/01		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		1,000.00-	291.74
08/01		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		8.92-	282.82
08/01		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	232.82
08/01		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	182.82
08/03	08/01	POINT OF SALE PURCHASE US CA NEWBERRY SPRI, NEWBERRY SPRINGS CTR NEWBERRY		2.69-	180.13
08/03	08/01	POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		1.99-	178.14
08/03	08/02	POINT OF SALE PURCHASE US CA NORWALK, CHEVRON/G&M OIL CO., CHEVRON/G&M OIL		72.04-	106.10
08/03	08/02	POINT OF SALE PURCHASE US CA BAKER, CHEVRON/CSI-099879/2 6011 BOLLINGER CA		8.17-	97.93
08/03	08/02	POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		11.42-	86.51
08/03		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		225.00	311.51
08/03	08/02	VISA - 07/30 BURGER KING #4041 LAS VEGAS NV 030275		11.47-	300.04
08/03	08/02	VISA - 07/31 MCDONALD'S F17022 LAS VEGAS NV 031317		28.97-	271.07
08/03	08/02	VISA - 07/30 EXXONMOBIL 99732497 NORTH LAS VEG NV 030976		50.00-	221.07
08/03	08/02	VISA - 07/31 JIFFY LUBE 2665 LAS VEGAS NV 031970		112.91-	108.16
08/04	08/03	VISA - 08/01 MCDONALD'S F25614 LAS VEGAS NV 001857		9.94-	98.22
08/04		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		4.99-	93.23
08/04		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		240.00	333.23
08/04		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		243.00-	90.23
08/04		NON-AFCU ATM TRANSACTION FEE		1.50-	88.73
08/05	08/04	POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/ANN ROAD, LL CHEVRON/ANN R		50.00-	38.73
08/05	08/04	VISA - 08/04 MICROSOFT*XBOX 142-56816630 WA 003209		9.99-	28.74
08/05	08/04	VISA - 08/04 MICROSOFT*XBOX REDMOND WA 004501		9.99-	18.75
08/05		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	118.75

Checking, Continued

Statement Period: August 01, 2020 - August 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
08/05		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SMITHS #4301 3013 W CRAIG RD		84.32-	34.43
08/05		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	94.43
08/05		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		50.00-	44.43
08/06		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		8.92-	35.51
08/06	08/05	VISA - 08/04 MICROSOFT*XBOX REDMOND WA 004882		2.99-	32.52
08/06	08/05	VISA - 08/05 MICROSOFT*XBOX REDMOND WA 004069		4.99-	27.53
08/06	08/05	VISA - 08/05 MICROSOFT*XBOX REDMOND WA 004068		9.99-	17.54
08/06	08/05	VISA - 08/04 MICROSOFT*XBOX REDMOND WA 004187		9.99-	7.55
08/06		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		40.00	47.55
08/06		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		9.99-	37.56
08/06		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	87.56
08/06		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	37.56
08/06		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		8.92-	28.64
08/07		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		9.99-	18.65
08/07		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		828.30	846.95
08/07		AUTOMATIC DEPOSIT, NAT SAFE DRIVERSACH BILL PPD		3,300.00	4,146.95
08/07		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	3,646.95
08/07		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		3,400.00-	246.95
08/07		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		1,000.00	1,246.95
08/07		VISA - NV LAS VEGAS, SOUTHWEST GAS CORPOR E COMMERCE GR		38.00-	1,208.95
08/07		VISA - NV LAS VEGAS, NV ENERGY NV ENERGY		346.55-	862.40
08/07		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		63.95-	798.45
08/07		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	898.45
08/07		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		25.81-	872.64
08/07		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	822.64
08/08	08/07	VISA - 08/07 MICROSOFT*XBOX REDMOND WA 006279		4.99-	817.65
08/08	08/07	VISA - 08/06 MICROSOFT*XBOX 142-56816830 WA 006460		9.99-	807.66
08/08	08/07	VISA - 08/06 MICROSOFT*XBOX REDMOND WA 006926		9.99-	797.67
08/10		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	747.67
08/10	08/09	VISA - 08/07 MICROSOFT*XBOX REDMOND WA 007792		1.99-	745.68
08/10	08/09	VISA - 08/08 MICROSOFT*XBOX REDMOND WA 008243		1.99-	743.69
08/10	08/09	VISA - 08/07 MICROSOFT*XBOX REDMOND WA 007011		4.99-	738.70
08/10	08/09	VISA - 08/07 MICROSOFT*XBOX REDMOND WA 007727		4.99-	733.71
08/10	08/09	VISA - 08/07 JUSTICE COURT LAS VEGAS S CLARKCOUNTYNV IN 0		5.00-	728.71
08/10	08/09	VISA - 08/07 MCDONALD'S F35219 NORTH LAS VEG NV 007879		33.74-	694.97
08/10	08/09	VISA - 08/07 JUSTICE COURT LAS VEGAS T CLARKCOUNTYNV NV 0		115.00-	579.97
08/10	08/09	VISA - 08/07 CNLV UTILITIES DEPT WEB PAYMENTUS.COM NV 007		129.62-	450.35
08/10	08/09	VISA - 08/08 SPRINT *WIRELESS 800-639-6111 KS 007203		175.54-	274.81
08/10	08/09	VISA - 08/07 ALLSTATE *PAYMENT 800-255-7828 IL 007995		234.02-	40.79
08/10		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX		9.99-	30.80
08/10		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS --		60.00	90.80
08/10		VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	75.81
08/10		POINT OF SALE PURCHASE			
		US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		9.99-	65.82
08/10		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	145.82
08/10		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		50.00-	95.82
08/11		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX		9.99-	85.83
08/11		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		4.99-	80.84
08/11		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS --		60.00	140.84
08/12	08/11	VISA - 08/11 MICROSOFT*XBOX REDMOND WA 011413		4.99-	135.85
08/12	08/11	VISA - 08/11 MICROSOFT*XBOX REDMOND WA 011434		4.99-	130.86

Checking, Continued

Statement Period: August 01, 2020 - August 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
08/12	08/11	VISA - 08/11 MICROSOFT*XBOX REDMOND WA 011476		4.99-	135.57
08/12	08/11	VISA - 08/11 MICROSOFT*XBOX 142-56816830 WA 010140		9.99-	125.58
08/12	08/11	VISA - 08/10 MICROSOFT*XBOX REDMOND WA 010315		9.99-	115.59
08/12	08/11	VISA - 08/11 MICROSOFT*XBOX REDMOND WA 010587		9.99-	105.60
08/12	08/11	VISA - 08/11 MICROSOFT*XBOX REDMOND WA 010842		9.99-	95.61
08/12	08/11	VISA - 08/10 MICROSOFT*XBOX REDMOND WA 010995		9.99-	85.62
08/12	08/11	VISA - 08/10 MICROSOFT*XBOX REDMOND WA 010783		19.99-	65.63
08/12		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	165.63
08/12		POINT OF SALE PURCHASE US NV LAS VEGAS, RAINBOW MARKET #9 5075 E WASHINGTO		63.94-	101.69
08/12		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		300.00	401.69
08/12		POINT OF SALE PURCHASE US NV LAS VEGAS, GAMESTOP #1702 161 N GAMESTOP #170		241.27-	160.42
08/13	08/12	POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		45.00-	115.42
08/13	08/12	VISA - 08/11 MICROSOFT*XBOX REDMOND WA 011912		4.99-	110.43
08/13	08/12	VISA - 08/11 MICROSOFT*XBOX REDMOND WA 011230		9.99-	100.44
08/13	08/12	VISA - 08/10 MCDONALD'S M6154 OF NV N LAS VEGAS NV 010677		15.58-	84.86
08/13		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		9.99-	74.87
08/13		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		4.99-	69.88
08/13		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		4.99-	64.89
08/13		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		4.99-	59.90
08/14	08/13	POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		19.99-	39.81
08/14		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,017.00	1,056.91
08/14	08/13	VISA - 08/13 MICROSOFT*XBOX REDMOND WA 012451		4.99-	1,051.92
08/14		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	551.92
08/14		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		61.42-	490.50
08/14		POINT OF SALE PURCHASE US NV LAS VEGAS, METRO PCS METRO PCS		153.00-	337.50
08/14	08/11	STAR NETWORK ATM ADJUSTMENT PAI ISO, 3870 W. SPRING MOU LAS VEG		63.00-	274.50
08/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		1,000.00	1,274.50
08/15	08/14	VISA - 08/13 MICROSOFT*XBOX REDMOND WA 013016		4.99-	1,269.51
08/15	08/14	VISA - 08/14 MICROSOFT*XBOX REDMOND WA 013466		4.99-	1,264.52
08/15	08/14	VISA - 08/14 MICROSOFT*XBOX REDMOND WA 013600		4.99-	1,259.53
08/15	08/14	VISA - 08/13 MICROSOFT*XBOX REDMOND WA 013568		9.99-	1,249.54
08/15	08/14	VISA - 08/14 MICROSOFT*XBOX REDMOND WA 013962		9.99-	1,239.55
08/15	08/14	VISA - 08/14 MICROSOFT*XBOX REDMOND WA 013970		9.99-	1,229.56
08/15	08/14	VISA - 08/13 MICROSOFT*XBOX REDMOND WA 013553		19.99-	1,209.57
08/15		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		300.00	1,509.57
08/15		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 3616 N LAS VEGAS B		203.00-	1,306.57
08/15		NON-AFCU ATM TRANSACTION FEE		1.50-	1,305.07
08/15		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 3616 N LAS VEGAS B		103.00-	1,202.07
08/15		NON-AFCU ATM TRANSACTION FEE		1.50-	1,200.57
08/15		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	1,300.57
08/15		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		58.50-	1,242.07
08/15		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	1,322.07
08/15		POINT OF SALE PURCHASE US NV LAS VEGAS, METRO PCS METRO PCS		69.13-	1,252.94
08/15		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		65.00	1,317.94
08/17	08/16	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	1,417.94
08/17	08/16	POINT OF SALE PURCHASE US NV NORTH LAS VEG, LOWE'S #2721 2570 EAST CRAIG R		42.28-	1,375.66
08/17	08/16	VISA - 08/14 MCDONALD'S F35219 NORTH LAS VEG NV 014073		33.33-	1,342.33
08/17	08/16	VISA - 08/14 SHELL OIL 57442053906 LAS VEGAS NV 014769		50.00-	1,292.33
08/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	1,392.33
08/17		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		42.51-	1,349.82
08/18	08/17	POINT OF SALE PURCHASE US NV NORTH LAS VEG, CITY EXPRESS #5 3870 E CRAIG R		14.56-	1,335.26
08/18	08/17	VISA - 08/16 PROGRESSIVE INS 855-758-0945 OH 014057		1,085.60-	249.66

Checking, Continued

Statement Period: August 01, 2020 - August 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
08/18		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	209.66
08/18		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		62.69-	146.97
08/19	08/18	VISA - 08/17 ROCK AUTO ROCKAUTO.COM WI 015425		64.23-	82.74
08/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	282.74
08/19		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CALIFORNIA AUTO GLAS CALIFORNIA AU		97.42-	185.32
08/19		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CHEVRON/TERRIBLE HER CHEVRON/T		45.00-	140.32
08/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		600.00	740.32
08/19		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		63.00-	677.32
08/19		NON-AFCU ATM TRANSACTION FEE		1.50-	675.82
08/20		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		40.00	715.82
08/20		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 6915 BLUE DIAMOND		43.00-	672.82
08/20		NON-AFCU ATM TRANSACTION FEE		1.50-	671.32
08/20		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	631.32
08/20		WITHDRAWAL		359.00-	272.32
08/20		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		2.50-	269.82
08/20		VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	254.83
08/21		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	214.83
08/21		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		15.00-	199.83
08/21		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,305.00	1,504.83
08/21	08/20	VISA - 08/19 MICROSOFT*XBOX REDMOND WA 019762		9.99-	1,494.84
08/21	08/20	VISA - 08/19 SMOG HUT N LAS VEGAS NV 019439		61.00-	1,433.84
08/21		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	933.84
08/21		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		20.00-	913.84
08/21		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		53.79-	860.05
08/21		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		11.11-	848.94
08/22		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		51.42-	797.52
08/22	08/21	VISA - 08/19 COMPLETE DMV SERVICES LAS VEGAS NV 019394		150.00-	647.52
08/22		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 6915 BLUE DIAMOND		203.00-	444.52
08/22		NON-AFCU ATM TRANSACTION FEE		1.50-	443.02
08/22		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		62.17-	380.85
08/22		STAR NETWORK ATM WITHDRAWAL US CA YERMO, 858 GHOST TOWN RD		203.00-	177.85
08/22		NON-AFCU ATM TRANSACTION FEE		1.50-	176.35
08/22		POINT OF SALE PURCHASE			
		US CA HESPERIA, UNITED PACIFIC 5 14921 BEAR VALLEY		60.00-	116.35
08/24	08/22	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		8.92-	107.43
08/24	08/23	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		150.00	257.43
08/24	08/23	POINT OF SALE PURCHASE			
		US NV LAS VEGAS, O'REILLY AUTO PARTS O'REILLY AUTO		47.66-	209.77
08/24	08/23	STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		83.00-	126.77
08/24	08/23	NON-AFCU ATM TRANSACTION FEE		1.50-	125.27
08/24		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	85.27
08/24		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		120.00	205.27
08/24		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 530 E CRAIG		123.00-	82.27
08/24		NON-AFCU ATM TRANSACTION FEE		1.50-	80.77
08/24		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		12.06-	68.71
08/25		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	148.71

AMERICA FIRST CREDIT UNION

STATEMENT

Checking, Continued

Statement Period: August 01, 2020 - August 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
08/25		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		42.50-	106.21
08/25		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		63.00-	43.21
08/25		NON-AFCU ATM TRANSACTION FEE		1.50-	41.71
08/25		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	71.71
08/25		POINT OF SALE PURCHASE			
		US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		7.99-	63.72
08/26	08/25	VISA - 08/25 MICROSOFT*XBOX REDMOND WA 024266		4.99-	58.73
08/26		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	118.73
08/26		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		37.50-	81.23
08/26		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		4.69-	76.54
08/27	08/26	VISA - 08/26 MICROSOFT*XBOX 142-56816830 WA 025917		7.99-	68.55
08/27	08/26	VISA - 08/26 MICROSOFT*XBOX REDMOND WA 025052		9.99-	58.56
08/27	08/26	VISA - 08/26 MICROSOFT*XBOX REDMOND WA 025354		9.99-	48.57
08/27	08/26	VISA - 08/24 ALL HOSE, INC 702-6436777 NV 024638		19.88-	28.69
08/27		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	88.69
08/27		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	148.69
08/27		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		30.00-	118.69
08/28		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	78.69
08/28		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,518.00	1,596.69
08/28	08/27	VISA - 08/27 MICROSOFT*XBOX REDMOND WA 026069		19.99-	1,576.70
08/28	08/27	VISA - 08/27 MICROSOFT*XBOX REDMOND WA 026139		19.99-	1,556.71
08/28		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	1,056.71
08/28		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/SHORT LINE E CHEVRON/SHORT		40.00-	1,016.71
08/29	08/28	POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SPEEDCO 936 SPEEDCO 936		131.87-	884.84
08/29	08/28	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		63.99-	820.85
08/29	08/28	VISA - 08/26 MCDONALD'S F25614 LAS VEGAS NV 026347		8.97-	811.88
08/29	08/28	VISA - 08/27 CHEVRON 0209891 LAS VEGAS NV 027395		21.00-	790.88
08/29		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		203.00-	587.88
08/29		NON-AFCU ATM TRANSACTION FEE		1.50-	586.38
08/31	08/30	POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		19.99-	566.39
08/31	08/30	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		61.42-	504.97
08/31	08/30	POINT OF SALE PURCHASE			
		US CA HESPERIA, UNITED PACIFIC 5 14921 BEAR VALLEY		40.00-	464.97
08/31	08/30	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, LOWE'S #2721 2570 EAST CRAIG R		23.55-	441.42
08/31	08/30	VISA - 08/28 MCDONALD'S F35219 NORTH LAS VEG NV 028445		23.13-	418.29
08/31		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	378.29
		ENDING BALANCE			378.29

Checking Summary

Item	Amount		Item	Amount		Item	Amount		Item	Amount
VISA	8.76	:	VISA	9.99	:	VISA	4.99	:	VISA	15.58
VISA	9.99	:	VISA	9.99	:	VISA	5.00	:	VISA	19.99
VISA	11.47	:	VISA	9.99	:	VISA	33.74	:	VISA	4.99
VISA	50.00	:	VISA	4.99	:	VISA	115.00	:	VISA	4.99
VISA	9.99	:	VISA	9.99	:	VISA	119.62	:	VISA	4.99
VISA	11.99	:	VISA	9.99	:	VISA	234.02	:	VISA	4.99
VISA	28.97	:	VISA	9.99	:	VISA	1.99	:	VISA	9.99
VISA	112.91	:	VISA	1.99	:	VISA	175.54	:	VISA	9.99
VISA	9.94	:	VISA	4.99	:	VISA	9.99	:	VISA	9.99
VISA	2.99	:	VISA	4.99	:	VISA	9.99	:	VISA	9.99

Checking Summary, Continued

Item	Amount	Item	Amount	Item	Amount	Item	Amount
VISA	14.99	VISA	9.99	VISA	150.00	VISA	19.99
VISA	14.99	VISA	9.99	VISA	19.88	VISA	21.00
VISA	4.99	VISA	33.33	VISA	4.99	VISA	23.13
VISA	4.99	VISA	50.00	VISA	7.99	VISA	38.00
VISA	9.99	VISA	1,085.60	VISA	8.97	VISA	346.55
VISA	19.99	VISA	64.23	VISA	9.99		
VISA	4.99	VISA	9.99	VISA	9.99		
VISA	4.99	VISA	61.00	VISA	19.99		

Total Checks and Visa Checking: 3,223.80 **Total Withdrawals:** 11,258.38 **Total Deposits:** 13,528.00

Excess Usage Fee Calculation

Service Provided	Unit Price	VOLUME Free	Charged	Service Fee
Deposits	0.150	1	0	0.00
Withdrawals	0.035%	10,000	17,959	6.28
Total Service Charge				6.28

This service charge will be assessed against your account and will appear on your next statement.
Excess charges are assessed when you exceed the allowable number of transactions.
If you have any questions concerning this charge please contact Business Services.

AMERICA FIRST
CREDIT UNION

STATEMENT

America First Federal Credit Union · 1-800-999-3961 · americafirst.com
P.O. Box 9199, Ogden, UT 84409

#BWNCHFQ
#847EXQUI00639337#
EXQUISITE TOWING ROADSIDE ASSISTANCE LLC
5321 CHINO HEIGHTS ST
NORTH LAS VEGAS NV 89081

Statement Date: September 30, 2020
Account Number: [redacted]3748

fyi for your information

There's no better time to get a low-rate auto loan. Because America First now offers no payments for 90 days on approved credit. Plus, you'll benefit from flexible terms & the best in high-quality service. Apply via **americafirst.com**, use our mobile app, or get financing directly at the dealer.

A Summary of Your Accounts

	Ending Balance	2020 Dividends
Share Savings	512.01	0.39
Checking	582.69	0.00
Total:	**1,094.70**	0.39

A Summary of Your Loans

	Ending Balance	Total Amount Due	Next Payment	2020 Interest

Share Savings

Statement Period: September 01, 2020 - September 30, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
		BEGINNING BALANCE		341.91
09/01		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	541.91
09/03		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	441.91
09/03		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	361.91
09/04		SHARE TRANSFER FROM CHECKING	500.00	861.91
09/04		MOBILE BANKING SHARE TRANSFER FROM CHECKING	1,175.00	1,986.91
09/04		DEPOSIT	250.00	2,236.91
09/04		OFFICIAL CHECK 135040146 TO COSTELLO REALTY & MANAGEMENT	1,475.00-	761.91
09/04		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	661.91
09/08	09/06	MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	561.91
09/08	09/06	MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	481.91
09/08	09/07	MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	401.91
09/08		MOBILE BANKING SHARE TRANSFER FROM CHECKING	400.00	801.91
09/08		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	721.91
09/09		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	521.91
09/09		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	421.91
09/10		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	341.91
09/10		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	281.91
09/11		SHARE TRANSFER FROM CHECKING	500.00	781.91
09/11		MOBILE BANKING SHARE TRANSFER FROM CHECKING	400.00	1,181.91
09/12		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,081.91
09/12		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	881.91
09/14	09/13	MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	781.91
09/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	70.00-	711.91
09/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	631.91

Share Savings, Continued

Statement Period: September 01, 2020 - September 30, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
09/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	431.9
09/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	351.9
09/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	150.00-	201.9
09/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	121.9
09/18		SHARE TRANSFER FROM CHECKING	500.00	621.9
09/18		MOBILE BANKING SHARE TRANSFER FROM CHECKING	500.00	1,121.9
09/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	921.9
09/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	821.9
09/21	09/20	MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	621.9
09/21		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	541.9
09/22		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	441.9
09/23		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	391.9
09/24		MOBILE BANKING SHARE TRANSFER TO CHECKING	20.00-	371.9
09/24		MOBILE BANKING SHARE TRANSFER TO CHECKING	70.00-	301.9
09/25		SHARE TRANSFER FROM CHECKING	500.00	801.9
09/25		MOBILE BANKING SHARE TRANSFER FROM CHECKING	1,000.00	1,801.9
09/25		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	1,721.9
09/25		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,621.9
09/26		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,521.9
09/26		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	1,321.9
09/26		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,221.9
09/28	09/27	MOBILE BANKING SHARE TRANSFER TO CHECKING	150.00-	1,071.9
09/28		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	971.9
09/28		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	921.9
09/29		WITHDRAWAL	80.00-	841.9
09/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	791.9
09/30		MOBILE BANKING SHARE TRANSFER TO CHECKING	180.00-	611.9
09/30		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00	711.9
09/30	10/01	DIVIDEND EARNED FOR PERIOD OF 09/01/2020 THROUGH 09/30/2020		
		ANNUAL PERCENTAGE YIELD EARNED IS 0.06%	.03	712.0
		ENDING BALANCE		712.0

Checking

Statement Period: September 01, 2020 - September 30, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
		BEGINNING BALANCE			378.2
09/01	08/31	VISA - 08/30 MICROSOFT*XBOX REDMOND WA 030654		1.99-	376.3
09/01	08/31	VISA - 08/31 MICROSOFT*XBOX REDMOND WA 030177		7.99-	368.3
09/01	08/31	BUSINESS SERVICE CHARGES		6.28-	362.0
09/01		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		123.00-	239.0
09/01		NON-AFCU ATM TRANSACTION FEE		1.50-	237.5
09/01		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	437.5
09/01		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		243.00-	194.5
09/01		NON-AFCU ATM TRANSACTION FEE		1.50-	193.0
09/01		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	153.0
09/02		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	113.0
09/02		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		11.42-	101.6
09/02		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CHEVRON/SHORT LINE M 6011 BOLL		7.25-	94.3
09/02		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		42.50-	51.8
09/03		POINT OF SALE PURCHASE			
		US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		1.00-	50.8
09/03	09/02	VISA - 08/31 MCDONALD'S F35219 NORTH LAS VEG NV 031287		8.97-	41.8
09/03		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	141.8

Checking, Continued

Statement Period: September 01, 2020 - September 30, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
09/03		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CAMPOUT INC CAMPOUT INC		61.76-	80.1
09/03		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		46.42-	33.7
09/03		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	113.7
09/03		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CHEVRON/SHORT LINE M 6011 BOLL		9.62-	104.0
09/04	09/03	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		42.50-	61.5
09/04		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,780.00	1,841.5
09/04		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	1,341.5
09/04		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		1,125.00-	216.5
09/04		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	316.5
09/04		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		71.90-	244.6
09/04		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		25.00-	219.6
09/05	09/04	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		53.61-	166.0
09/05	09/04	VISA - 09/03 SIERRA TRUCK BODY AND EQU 702-6337181 NV 003		10.30-	155.7
09/08	09/06	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	255.7
09/08	09/06	POINT OF SALE PURCHASE			
		US NV LAS VEGAS, O'REILLY AUTO PARTS O'REILLY AUTO		37.92-	217.8
09/08	09/06	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, LOWE'S #2721 2570 EAST CRAIG R		26.66-	191.2
09/08	09/06	STAR NETWORK ATM WITHDRAWAL US NV N.LAS VEGAS, MLK & CRAIG		43.00-	148.2
09/08	09/06	NON-AFCU ATM TRANSACTION FEE		1.50-	146.7
09/08	09/06	POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		9.99-	136.7
09/08	09/06	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	216.7
09/08	09/06	POINT OF SALE PURCHASE			
		US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		7.99-	208.7
09/08	09/07	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	288.7
09/08	09/07	POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		47.50-	241.2
09/08	09/07	VISA - 09/06 MICROSOFT*XBOX REDMOND WA 006907		7.98-	233.2
09/08	09/07	VISA - 09/07 MICROSOFT*XBOX REDMOND WA 006152		7.99-	225.2
09/08	09/07	VISA - 09/07 MICROSOFT*XBOX 142-56816830 WA 006822		7.99-	217.2
09/08	09/07	VISA - 09/06 SELF LENDER 4 877-8030999 TX 006875		9.57-	207.6
09/08	09/06	VISA - 09/05 BRONX IGNITION INC 718-792-2155 NY 004965		130.65-	77.0
09/08	09/09	AUTOMATIC DEPOSIT, NAT SAFE DRIVERSACH BILL PPD		537.25	614.2
09/08		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		400.00-	214.2
09/08		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		51.42-	162.8
09/08		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	242.8
09/08		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		43.00-	199.8
09/08		NON-AFCU ATM TRANSACTION FEE		1.50	198.3
09/09		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	398.3
09/09		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		63.00-	335.3
09/09		NON-AFCU ATM TRANSACTION FEE		1.50-	333.8
09/09		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		56.42-	277.4
09/09		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	377.4
09/09		STAR NETWORK ATM WITHDRAWAL			
		US NV LAS VEGAS, 7770 S. JONES BLVD		103.50-	273.9
09/09		NON-AFCU ATM TRANSACTION FEE		1.50-	272.4
09/10	09/09	VISA - 09/08 SQ *VEGAS TOWING SU LAS VEGAS NV 008568		115.96-	156.4
09/10		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	236.4
09/10		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		45.00-	191.4
09/10		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	251.4
09/10		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		53.68-	197.8

Checking, Continued

Statement Period: September 01, 2020 - September 30, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
09/10	09/11	VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	182.8
09/10		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		7.99-	174.8
09/11		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,104.00	1,278.8
09/11	09/10	VISA - 09/09 MCDONALD'S F35160 LAS VEGAS NV 009920		9.41-	1,269.4
09/11		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	769.4
09/11		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		400.00-	369.4
09/11		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		13.61-	355.8
09/11		POINT OF SALE PURCHASE US NV HENDERSON, SHELL SERVICE STATIO SHELL SERVICE		45.00-	310.8
09/12	09/11	VISA - 09/11 MICROSOFT*XBOX REDMOND WA 010212		7.99-	302.8
09/12	09/11	VISA - 09/11 MICROSOFT*XBOX REDMOND WA 010144		19.99-	282.8
09/12	09/11	VISA - 09/09 HARRIS/PAYVISION 312-4237444 IL 009597		84.95-	197.8
09/12		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	297.8
09/12		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		53.92-	243.9
09/12		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	443.9
09/12		POINT OF SALE PURCHASE US NV LAS VEGAS, O'REILLY AUTO PARTS O'REILLY AUTO		153.88-	290.0
09/12		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER 6011 BOLLINGE		2.50-	287.5
09/14	09/13	POINT OF SALE PURCHASE US NV LAS VEGAS, O'REILLY AUTO PARTS O'REILLY AUTO		7.58-	280.0
09/14	09/13	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	380.0
09/14	09/13	POINT OF SALE PURCHASE US NV LAS VEGAS, O'REILLY AUTO PARTS O'REILLY AUTO		101.82-	278.1
09/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		70.00	348.1
09/14		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		53.92-	294.2
09/14	09/13	VISA - 09/10 MCDONALD'S F35219 NORTH LAS VEG NV 010704		8.97-	285.2
09/14	09/13	VISA - 09/11 MCDONALD'S F35219 NORTH LAS VEG NV 011300		22.28-	263.0
09/14	09/13	VISA - 09/12 SQ *VEGAS TOWING SU LAS VEGAS NV 012572		176.65-	86.3
09/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	166.3
09/14		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 330 N RANCHO DR		83.00-	83.3
09/14		NON-AFCU ATM TRANSACTION FEE		1.50-	81.8
09/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	281.8
09/14		POINT OF SALE PURCHASE US NV LAS VEGAS, METRO PCS METRO PCS		127.78-	154.0
09/14		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		17.10-	136.9
09/15		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		6.49-	130.4
09/15	09/14	VISA - 09/12 MCDONALD'S F21664 LAS VEGAS NV 012337		8.44-	122.0
09/16	09/15	VISA - 09/15 MICROSOFT*XBOX REDMOND WA 014435		7.99-	114.0
09/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	194.0
09/16		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		52.50-	141.5
09/17		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	91.5
09/17	09/16	VISA - 09/14 SHELL OIL 57442053906 LAS VEGAS NV 014541		56.42-	35.1
09/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		150.00	185.1
09/17		POINT OF SALE PURCHASE US NV LAS VEGAS, CARQUEST 7789 CARQUEST 7789		100.48-	84.6
09/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	164.6
09/17		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		4.69-	159.9
09/17		POINT OF SALE PURCHASE US NV LAS VEGAS, 7-ELEVEN 2691 W SAHARA		14.84-	145.1
09/18		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,788.00	1,933.1
09/18	09/17	VISA - 09/16 MCFADDEN-DALE LAS VEGAS LAS VEGAS NV 016537		25.90-	1,907.2
09/18		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	1,407.2
09/18		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		500.00-	907.2
09/18		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5082 E LAKE MEAD		143.25-	764.0

Checking, Continued

Statement Period: September 01, 2020 - September 30, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
09/18		NON-AFCU ATM TRANSACTION FEE		1.50-	762.4
09/18		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		41.42-	[illegible]
09/18		POINT OF SALE PURCHASE US NV LAS VEGAS, CARQUEST 7796 CARQUEST 7796		192.69-	[illegible]
09/18		POINT OF SALE REVERSAL US NV LAS VEGAS, CARQUEST 7796 CARQUEST 7796		75.85	604.0
09/18		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		32.50-	[illegible]
09/19		POINT OF SALE REVERSAL US NV LAS VEGAS, CARQUEST 7796 CARQUEST 7796		117.03	688.5
09/19		POINT OF SALE PURCHASE US NV LAS VEGAS, NAPA STORE 4636061 NAPA STORE 4636		289.33-	399.2
09/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	599.2
09/19		POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		8.99-	590.2
09/19		POINT OF SALE PURCHASE US NV LAS VEGAS, CHAPMAN LAS VEGAS DO CHAPMAN LAS V		277.71-	[illegible]
09/19		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		40.00-	[illegible]
09/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	[illegible]
09/19		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		60.18-	312.3
09/21	09/20	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	512.3
09/21		VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	497.3
09/21	09/20	VISA - 09/18 MCDONALD'S F35219 NORTH LAS VEG NV 016261		18.95-	478.4
09/21	09/20	VISA - 09/18 SIERRA TRUCK BODY AND EQU 702-6337181 NV 018		107.85-	370.5
09/21	09/20	VISA - 09/18 IN *DESERT EYE CARE 702-7910033 NV 017640		110.54-	260.0
09/21		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	340.0
09/21		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		45.00-	295.0
09/22	09/21	VISA - 09/19 MCDONALD'S F25614 LAS VEGAS NV 019176		9.30-	285.7
09/22	09/21	VISA - 09/21 MICROSOFT*XBOX REDMOND WA 020003		19.99-	265.7
09/22	09/21	VISA - 09/19 TRACTION STR7420852 N LAS VEGAS NV 019258		28.57-	[illegible]
09/22		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STATIC SHELL SER		40.00-	197.1
09/22	09/23	POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		19.99-	[illegible]
09/22		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	237.1
09/22		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	197.1
09/23	09/22	VISA PURCHASE RETURN - 09/20 O'REILLY AUTO PARTS 5730 LAS VEGAS NV		62.85	300.0
09/23	09/22	VISA - 09/21 ALLSTATE *PAYMENT 800-255-7828 IL 021324		187.28-	112.7
09/23		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		2.50-	110.2
09/23		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	160.2
09/23		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	120.2
09/24	09/23	VISA - 09/23 MICROSOFT*XBOX REDMOND WA 022304		19.99-	100.2
09/24	09/23	VISA - 09/23 MICROSOFT*XBOX REDMOND WA 022458		19.99-	80.2
09/24		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		11.42-	68.8
09/24		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	28.8
09/24		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		20.00	48.8
09/24		POINT OF SALE PURCHASE US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		7.99-	40.8
09/24		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		70.00	110.8
09/24		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER 6011 BOLLINGE		12.58-	98.2
09/25		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,662.00	1,760.2
09/25	09/24	VISA - 09/23 MCDONALD'S F900 NORTH LAS VEG NV 023533		11.15-	1,749.1
09/25		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	1,249.1

HGW 326

Checking, Continued

Statement Period: September 01, 2020 - September 30, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
09/25		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		1,000.00-	249.11
09/25		STAR NETWORK ATM WITHDRAWAL			
		US NV LAS VEGAS, 1594 N. NELLIS BLV		143.00-	106.11
09/25		NON-AFCU ATM TRANSACTION FEE		1.50-	104.61
09/25		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	184.61
09/25		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		62.68-	121.93
09/25		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	221.93
09/25		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, ROSS STORES #1036 ROSS STORES #103		109.39-	112.54
09/26		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	212.54
09/26		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	412.54
09/26		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	512.54
09/26		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CAMPOUT INC CAMPOUT INC		111.63-	400.91
09/26		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, OFFICE DEPOT 00 3890 OFFICE DEPOT		14.08-	386.83
09/28	09/27	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, LOWE'S #2721 LOWE'S #2721		12.05-	374.78
09/28	09/27	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		150.00	524.78
09/28	09/27	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SAMSCLUB #4974 2650 EAST CRAIG		88.53-	436.25
09/28		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		25.00-	411.25
09/28	09/27	VISA - 09/24 MCDONALD'S F21664 LAS VEGAS NV 024369		8.44-	402.81
09/28	09/27	VISA - 09/25 MCFADDEN-DALE LAS VEGAS LAS VEGAS NV 025211		12.30-	390.51
09/28	09/27	VISA - 09/26 FRY'S ELECTRONICS #27 LAS VEGAS NV 026146		16.56-	373.95
09/28	09/27	VISA - 09/25 MCDONALD'S F35219 NORTH LAS VEG NV 025611		26.73-	347.22
09/28	09/27	VISA - 09/26 B AND R ST9 702-551-8686 NV 026610		100.00-	247.22
09/28		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		51.57-	195.65
09/28		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	295.65
09/28		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SPEEDEE MART 126 SPEEDEE MART 126		3.00-	292.65
09/28		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	342.65
09/28		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		43.64-	299.01
09/29	09/30	AUTOMATIC DEPOSIT, NAT SAFE DRIVERSACH BILL PPD		100.50	399.51
09/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	449.51
09/29		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	399.51
09/30	09/29	VISA - 09/28 B AND R ST9 702-551-8686 NV 028691		80.00-	319.51
09/30		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		180.00	499.51
09/30		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	599.51
09/30		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CHEVRON/SHORT LINE M 6011 BOLL		16.82-	582.69
		ENDING BALANCE			582.69

Checking Summary

Item	Amount		Item	Amount		Item	Amount		Item	Amount
VISA	1.99	:	VISA	9.41	:	VISA	56.42	:	VISA	11.15
VISA	7.99	:	VISA	84.95	:	VISA	7.99	:	VISA	10.99
VISA	8.97	:	VISA	8.97	:	VISA	25.90	:	VISA	19.99
VISA	10.30	:	VISA	7.99	:	VISA	18.95	:	VISA	8.44
VISA	130.65	:	VISA	19.99	:	VISA	107.85	:	VISA	12.30
VISA	7.98	:	VISA	22.28	:	VISA	110.54	:	VISA	26.73
VISA	9.57	:	VISA	8.44	:	VISA	9.30	:	VISA	16.56
VISA	7.99	:	VISA	14.99	:	VISA	28.57	:	VISA	100.00
VISA	7.99	:	VISA	14.59	:	VISA	19.99	:	VISA	80.00
VISA	115.96	:	VISA	176.65	:	VISA	187.28	:	VISACR	62.85CR

Checking Summary, Continued

Total Checks and Visa Checking:	1,546.00	**Total Withdrawals:**	9,827.08	**Total Deposits:**	11,577.4

AMERICA FIRST
CREDIT UNION

STATEMENT

America First Federal Credit Union · 1-800-999-3961 · americafirst.com
P.O. Box 9199, Ogden, UT 84409

#BWNCHFQ
#847EXQUI00639337#
EXQUISITE TOWING ROADSIDE ASSISTANCE LLC
5321 CHINO HEIGHTS ST
NORTH LAS VEGAS NV 89081

Statement Date: October 31, 2020
Account Number: [redacted]3748

fyi — for your information

Each year, America First collects donations to buy new shoes for schoolchildren in need. Thanks to your generosity, Warm the Soles of Kids is an enduring success and we're hoping you'll again join our effort. Contribute at **americafirst.com** & help make the holidays brighter for the less fortunate.

A Summary of Your Accounts

	Ending Balance	2020 Dividends
Share Savings	1,474.04	0.42
Checking	339.84	0.00
Total:	1,813.88	0.42

A Summary of Your Loans

Ending Balance	Total Amount Due	Next Payment	2020 Interest

Share Savings

Statement Period: October 01, 2020 - October 31, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
		BEGINNING BALANCE		912.01
10/02	10/01	MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	462.01
10/02		SHARE TRANSFER FROM CHECKING	500.00	962.01
10/02		MOBILE BANKING SHARE TRANSFER FROM CHECKING	200.00	1,162.01
10/05		DEPOSIT	350.00	1,512.01
10/05		OFFICIAL CHECK 135040870 TO COSTELLO REALTY MANAGEMENT	1,475.00-	37.01
10/09		SHARE TRANSFER FROM CHECKING	500.00	537.01
10/15	10/14	MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	487.01
10/15		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	437.01
10/16		MOBILE BANKING SHARE TRANSFER FROM CHECKING	1,000.00	1,437.01
10/16		MOBILE BANKING SHARE TRANSFER FROM CHECKING	167.00	1,604.01
10/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	280.00-	1,324.01
10/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	40.00-	1,284.01
10/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	1,234.01
10/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	90.00-	1,144.01
10/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	1,094.01
10/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	894.01
10/19	10/18	MOBILE BANKING SHARE TRANSFER TO CHECKING	90.00-	804.01
10/19	10/18	MOBILE BANKING SHARE TRANSFER TO CHECKING	40.00-	764.01
10/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	714.01
10/20		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	634.01
10/20		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	554.01
10/20		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	494.01
10/21		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	434.01
10/22		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	384.01

Share Savings, Continued

Statement Period: October 01, 2020 - October 31, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
10/22		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	284.01
10/23		SHARE TRANSFER FROM CHECKING	500.00	784.01
10/23		MOBILE BANKING SHARE TRANSFER FROM CHECKING	500.00	1,284.01
10/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	1,084.01
10/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	984.01
10/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	934.01
10/30		SHARE TRANSFER FROM CHECKING	500.00	1,434.01
10/30		MOBILE BANKING SHARE TRANSFER FROM CHECKING	500.00	1,934.01
10/30		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,834.01
10/30		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,734.01
10/31		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,634.01
10/31		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	1,554.01
10/31		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	1,474.01
10/31	11/01	DIVIDEND EARNED FOR PERIOD OF 10/01/2020 THROUGH 10/31/2020		
		ANNUAL PERCENTAGE YIELD EARNED IS 0.04%	.03	1,474.04
		ENDING BALANCE		1,474.04

Checking

Statement Period: October 01, 2020 - October 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
		BEGINNING BALANCE			582.69
10/02	10/01	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	632.69
10/02	10/01	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		50.00-	582.69
10/02		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		870.00	1,452.69
10/02	10/01	VISA - 09/30 ALL HOSE, INC 702-6436777 NV 030251		266.58-	1,186.11
10/02		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	686.11
10/02		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		200.00-	486.11
10/02		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, BURGER KING #15624 Q 6780 N DURANG		4.75-	481.36
10/02		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, TERRIBLES #335 1591 N DECATUR BLV		12.69-	468.67
10/02		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		45.00-	423.67
10/03		VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	408.68
10/05	10/04	VISA - 10/02 MCDONALD'S F25614 LAS VEGAS NV 002378		11.13-	397.55
10/05	10/04	VISA - 10/02 MCDONALD'S F35219 NORTH LAS VEG NV 002199		21.10-	376.45
10/06		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	326.45
10/07		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		50.00-	276.45
10/07		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 530 E CRAIG		23.00-	253.45
10/07		NON-AFCU ATM TRANSACTION FEE		1.50-	251.95
10/07		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		9.07-	242.88
10/08	10/07	VISA - 10/06 SELF LENDER 877-8830999 TX 006432		49.74-	193.14
10/08		POINT OF SALE PURCHASE			
		US NV N. LAS VEGAS, BURGER KING #8761 Q 3831 E CRA		4.96-	188.18
10/08		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		59.07-	129.11
10/08		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		11.18-	117.93
10/09		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,448.00	1,565.93
10/09		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	1,065.93
10/09		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		50.00-	1,015.93
10/09		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, WAL-MART #2483 6973 BLUE DIAMOND		10.52-	1,005.41
10/10	10/11	VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	990.42

Checking, Continued

Statement Period: October 01, 2020 - October 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
10/13	10/12	STAR NETWORK ATM WITHDRAWAL			
		US NV N. LAS VEGAS, 1970 W. CRAIG ROAD		43.00-	947.47
10/13	10/12	NON-AFCU ATM TRANSACTION FEE		1.50-	945.97
10/13	10/12	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, MURPHY EXPRESS 8782 1970 W CRA		38.31-	907.66
10/13	10/12	POINT OF SALE PURCHASE			
		US NV LAS VEGAS, KILLER SOUNDS LLC KILLER SOUNDS LL		130.00-	777.66
10/13	10/11	VISA - 10/09 MCDONALD'S F35219 NORTH LAS VEG NV 009037		30.41-	747.25
10/13	10/11	VISA - 10/09 PROGRESSIVE INS 855-758-0945 OH 009732		506.00-	241.25
10/13	10/14	AUTOMATIC DEPOSIT, NAT SAFE DRIVERSACH BILL PPD		36.00	277.25
10/13		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/CHEYENNE 03, CHEVRON/CHEYE		53.55-	223.70
10/13		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, WAL-MART SUPER CENTE 2483 WAL-SAMS		13.26-	210.39
10/14		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, ARCO #4277 5020 N DECATU		50.35-	160.04
10/15	10/14	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	210.04
10/15	10/14	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		32.74-	177.30
10/15		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	227.30
10/15		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		40.60-	186.70
10/15		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		9.07-	177.63
10/16		AUTOMATIC DEPOSIT, COPART SALVAGE TSUBPAYMENT CCD		1,227.00	1,404.63
10/16	10/15	VISA - 10/13 MCDONALD'S F35219 NORTH LAS VEG NV 013804		7.90-	1,396.73
10/16		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		1,000.00-	396.73
10/16		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		167.00-	229.73
10/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		280.00	509.73
10/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	539.73
10/17	10/16	VISA - 10/14 HARRIS/PAYVISION 312-4237444 IL 014350		128.95-	410.78
10/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	460.78
10/17		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		45.00-	415.78
10/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	515.78
10/17		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		9.71-	506.07
10/17		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 3820 E CRAIG RD		62.75-	443.32
10/17		NON-AFCU ATM TRANSACTION FEE		1.50-	441.82
10/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	491.82
10/17		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		50.00-	441.82
10/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	641.82
10/17		STAR NETWORK ATM WITHDRAWAL			
		US NV NORTH LAS VEG, 5575 NORTH 5TH STR		203.00-	438.82
10/17		NON-AFCU ATM TRANSACTION FEE		1.50-	437.32
10/18	10/18	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		90.00	527.32
10/19	10/18	STAR NETWORK ATM WITHDRAWAL			
		US NV LAS VEGAS, 7325 S. JONES BLVD		43.00-	484.32
10/19	10/18	NON-AFCU ATM TRANSACTION FEE		1.50-	482.82
10/19	10/18	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		40.00	522.82
10/19	10/18	POINT OF SALE PURCHASE			
		US NV N LAS VEGAS, PILOT #0341 PILOT #0341		62.55-	460.27
10/19	10/18	VISA - 10/17 SQ *WILD BOOTS LAS VEGAS NV 017159		21.67-	438.60
10/19	10/18	VISA - 10/16 MCDONALD'S F35219 NORTH LAS VEG NV 016988		23.92-	414.68
10/19	10/18	VISA - 10/16 PROGRESSIVE INS 855-758-0945 OH 016500		377.50-	37.18
10/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	87.18
10/19		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/HER-GLU 1 LL CHEVRON/HER-G		45.00-	42.18
10/20		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	122.18
10/20		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		60.18	62.00

Checking, Continued

Statement Period: October 01, 2020 - October 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
10/20		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	142.00
10/20		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	202.00
10/20		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		59.07-	142.93
10/21	10/20	VISA - 10/19 ALL HOSE, INC 702-6436777 NV 019035		33.48-	109.45
10/21		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/ETT I, LLC 6011 BOLLINGER		12.08-	97.37
10/21		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	157.37
10/21		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		50.00-	107.37
10/22	10/21	VISA - 10/20 MCFADDEN-DALE LAS VEGAS LAS VEGAS NV 020129		64.96-	42.41
10/22		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		9.71-	32.70
10/22		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	82.70
10/22		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		50.00-	32.70
10/22		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	132.70
10/22		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		53.05-	79.65
10/22		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		30.00-	49.65
10/23		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,320.00	1,369.65
10/23		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	869.65
10/23		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		500.00-	369.65
10/23		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		13.76-	355.89
10/23		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, AZ AUTO PARTS AZ AUTO PARTS		48.77-	307.12
10/24		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		53.57-	253.55
10/26	10/25	VISA - 10/24 MCFADDEN-DALE LAS VEGAS LAS VEGAS NV 024123		6.52-	247.03
10/26	10/25	VISA - 10/22 CHICK-FIL-A #04113 NORTH LAS VEG NV 022184		9.52-	237.51
10/26	10/25	VISA - 10/23 MCDONALD'S F35219 NORTH LAS VEG NV 023419		30.63-	206.88
10/26		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		40.00-	166.88
10/27	10/26	VISA - 10/24 JACK IN THE BOX 7258 LAS VEGAS NV 024394		7.90-	158.98
10/27		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		37.58-	121.40
10/27		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		39.08-	82.32
10/28		DEPOSIT		468.16	550.48
10/28		WITHDRAWAL		400.00-	150.48
10/29		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		44.96-	105.52
10/29		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		34.07-	71.45
10/29	10/28	VISA - 10/26 MCDONALD'S H6154 OF NV N LAS VEGAS NV 026133		10.48-	60.97
10/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	260.97
10/29		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 5180 N. LAMB BLVD		203.00-	57.97
10/29		NON-AFCU ATM TRANSACTION FEE		1.50-	56.47
10/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	156.47
10/29		POINT OF SALE PURCHASE			
		US NV N LAS VEGAS, BIG 5 SPORTING 254 BIG 5 SPORTIN		92.09-	64.38
10/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	114.38
10/29		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		51.83-	62.55
10/30		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		50.00-	12.55
10/30		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,291.00	1,303.55
10/30	10/29	VISA - 10/27 BURGER KING #5651 LAS VEGAS NV 027928		8.33-	1,295.22
10/30		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	795.22
10/30		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		500.00-	295.22

Checking, Continued

Statement Period: October 01, 2020 - October 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
10/30		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, WAL-MART #2483 6973 BLUE DIAMOND		21.33-	273.89
10/30		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, BIG 5 SPORTING D06 BIG 5 SPORTING		103.99-	169.90
10/30		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/ETT 1, LLC 6011 HOLLINGER		14.58-	155.32
10/30		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, BIG 5 SPORTING 117 BIG 5 SPORTING		119.09-	36.23
10/30		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	136.23
10/30		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 530 E CRAIG		103.00-	33.23
10/30		NON-AFCU ATM TRANSACTION FEE		1.50-	31.73
10/30		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, GREEN VALLEY GRO 401 GREEN VALLEY		4.39-	27.34
10/30		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	127.34
10/31		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	227.34
10/31		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	307.34
10/31		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	387.34
10/31		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		47.50-	339.84
		ENDING BALANCE			339.84

Checking Summary

Item	Amount		Item	Amount		Item	Amount		Item	Amount
VISA	266.58	:	VISA	14.99	:	VISA	33.48	:	VISA	10.48
VISA	11.13	:	VISA	7.90	:	VISA	64.96	:	VISA	8.33
VISA	21.10	:	VISA	128.95	:	VISA	9.52	:	VISA	14.99
VISA	49.74	:	VISA	23.92	:	VISA	30.63			
VISA	30.41	:	VISA	377.50	:	VISA	6.52			
VISA	500.00	:	VISA	21.67	:	VISA	7.90			

Total Checks and Visa Checking: 1,640.70 **Total Withdrawals:** 7,542.31 **Total Deposits:** 8,940.16

AMERICA FIRST
CREDIT UNION

STATEMENT

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#BWNCHFQ
#847EXQUI0063933/#
EXQUISITE TOWING ROADSIDE ASSISTANCE LLC
5321 CHINO HEIGHTS ST
NORTH LAS VEGAS NV 89081

Statement Date: November 30, 2020
Account Number: [redacted]3748

fyi for your information

Are your car payments too high? Our new auto loans have rates as low as 1.99% APR* for 36 months and no payments for 90 days! Plus, you'll benefit from flexible terms and quality member service. Apply today. *Annual percentage rate, on approved credit. Eligibility & conditions apply.

A Summary of Your Accounts

	Ending Balance	2020 Dividends
Share Savings	1,073.68	0.45
Checking	518.47	0.00
Total:	**1,592.15**	**0.45**

A Summary of Your Loans

Ending Balance	Total Amount Due	Next Payment	2020 Interest

Share Savings

Statement Period: November 01, 2020 - November 30, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
		BEGINNING BALANCE		1,473.04
11/01		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,373.04
11/01		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	1,173.04
11/01		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	973.04
11/03		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	893.04
11/04		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	813.04
11/05		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	783.04
11/05		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	683.04
11/06		SHARE TRANSFER FROM CHECKING	500.00	1,183.04
11/06		MOBILE BANKING SHARE TRANSFER FROM CHECKING	500.00	1,683.04
11/06		MOBILE BANKING SHARE TRANSFER FROM CHECKING	200.00	1,883.04
11/06		DEPOSIT	350.00	2,233.04
11/06		OFFICIAL CHECK 13504165 TO COSTELLO REALTY MANAGEMENT	1,485.00-	748.04
11/06		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	718.04
11/09	11/08	MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	618.04
11/09	11/08	MOBILE BANKING SHARE TRANSFER TO CHECKING	10.00-	608.04
11/09		MOBILE BANKING SHARE TRANSFER TO CHECKING	120.00-	488.04
11/10		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	438.04
11/10		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	358.04
11/12	11/11	MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	308.04
11/12		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	208.04
11/13		MOBILE BANKING SHARE TRANSFER TO CHECKING	20.00-	188.04
11/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	40.00-	148.04
11/16		MOBILE BANKING SHARE TRANSFER FROM CHECKING	1,000.00	1,148.04
11/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	948.04

Share Savings, Continued

Statement Period: November 01, 2020 - November 30, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
11/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	150.00-	799.04
11/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	769.04
11/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	689.04
11/18		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	589.04
11/18		MOBILE BANKING SHARE TRANSFER TO CHECKING	40.00-	549.04
11/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	469.04
11/20		SHARE TRANSFER FROM CHECKING	500.00	963.04
11/20		MOBILE BANKING SHARE TRANSFER FROM CHECKING	700.00	1,663.04
11/20		MOBILE BANKING SHARE TRANSFER FROM CHECKING	200.00	1,863.04
11/21		MOBILE BANKING SHARE TRANSFER TO CHECKING	310.00-	1,553.04
11/21		MOBILE BANKING SHARE TRANSFER TO CHECKING	300.00-	1,253.04
11/24		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	1,203.04
11/25		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	1,153.04
11/25		MOBILE BANKING SHARE TRANSFER TO CHECKING	134.18-	1,018.86
11/25		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	968.86
11/27		MOBILE BANKING SHARE TRANSFER FROM CHECKING	500.00	1,468.86
11/27		MOBILE BANKING SHARE TRANSFER FROM CHECKING	237.00	1,705.86
11/27		MOBILE BANKING SHARE TRANSFER FROM CHECKING	100.00	1,805.86
11/28		MOBILE BANKING SHARE TRANSFER TO CHECKING	40.00-	1,765.86
11/28		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	1,685.86
11/28		MOBILE BANKING SHARE TRANSFER TO CHECKING	229.21-	1,456.65
11/28		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	1,376.65
11/30	11/29	MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	1,176.65
11/30	11/29	MOBILE BANKING SHARE TRANSFER TO CHECKING	83.00-	1,093.65
11/30	12/01	DIVIDEND EARNED FOR PERIOD OF 11/01/2020 THROUGH 11/30/2020		
		ANNUAL PERCENTAGE YIELD EARNED IS 0.04%	.03	1,093.68
		ENDING BALANCE		1,093.68

Checking

Statement Period: November 01, 2020 - November 30, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
		BEGINNING BALANCE			339.84
11/01		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	439.84
11/01		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 530 E CRAIG		83.00-	356.84
11/01		NON-AFCU ATM TRANSACTION FEE		1.50-	355.34
11/01		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	555.34
11/01		POINT OF SALE PURCHASE US NV LAS VEGAS, SPEEDCO 936 SPEEDCO 936		131.87-	423.47
11/01		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	623.47
11/01		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 530 E CRAIG		203.00	420.47
11/01		NON-AFCU ATM TRANSACTION FEE		1.50-	418.97
11/02		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		47.19-	371.78
11/02		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		13.76-	358.02
11/02		VISA - WA REDMOND, MICROSOFT 1 MICROSOFT WAY		14.99-	343.03
11/03	11/02	VISA - 10/31 OLIVE GARDEN 0021440 LAS VEGAS NV 030753		30.19-	312.84
11/03	11/02	VISA - 10/30 BUFFALO WILD WINGS 0174 N LAS VEGAS NV 03012		42.16-	270.68
11/03	11/02	VISA - 10/31 NORTH LAS VEGAS WEIGHT E NORTH LAS VEG NV 03		74.78-	195.90
11/03	11/02	VISA - 10/31 NORTH LAS VEGAS WEIGHT E NORTH LAS VEG NV 03		86.70-	109.20
11/03		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	189.20
11/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		48.68-	140.52
11/04		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER 6011 BOLLINGE		4.28-	136.24
11/04		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	216.24
11/04		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, 530 E CRAIG		43.00-	173.24
11/04		NON-AFCU ATM TRANSACTION FEE		1.50-	171.74

Checking, Continued

Statement Period: November 01, 2020 - November 30, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
11/04		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		41.51	130.23
11/05		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	160.23
11/05		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		11.57-	148.66
11/05		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		11.57-	137.09
11/05		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	237.09
11/05		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		35.63-	201.46
11/05		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		25.00-	176.46
11/05		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, O'REILLY AUTO PARTS O'REILLY AUTO		20.56-	155.90
11/06		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,333.00	1,488.90
11/06	11/05	VISA - 11/03 SHELL OIL 57442053906 LAS VEGAS NV 003249		37.63-	1,451.27
11/06		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	951.27
11/06		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		500.00-	451.27
11/06		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		200.00-	251.27
11/06		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		11.57-	239.70
11/06		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	269.70
11/06		POINT OF SALE PURCHASE			
		US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		7.99-	261.71
11/06	11/07	POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		7.99-	253.72
11/06		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		15.95-	237.77
11/07		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		4.18-	233.59
11/07		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		25.00-	208.59
11/07		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		48.46-	160.13
11/07	11/06	VISA - 11/04 MCDONALD'S F35219 NORTH LAS VEG NV 004997		9.95-	150.18
11/07	11/06	VISA - 11/05 CHEVRON 0209891 LAS VEGAS NV 005245		30.01-	120.17
11/07		DEPOSIT		577.04	697.21
11/07		WITHDRAWAL		500.00-	197.21
11/09	11/08	STAR NETWORK ATM WITHDRAWAL			
		US NV LAS VEGAS, 5325 S DECATUR BLV		83.50-	113.71
11/09	11/08	NON-AFCU ATM TRANSACTION FEE		1.50-	112.21
11/09	11/08	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	212.21
11/09	11/08	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, LOWE'S #2721 2570 EAST CRAIG R		29.13-	183.08
11/09	11/08	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		10.00	193.08
11/09	11/08	VISA - 11/06 SELF LENDER 877-8830999 TX 006352		49.74-	143.34
11/09	11/08	VISA - 11/06 DOMINO'S 7469 N LAS VEGAS NV 006896		62.79-	80.55
11/09		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		120.00	200.55
11/10	11/09	VISA - 11/09 MICROSOFT*XBOX REDMOND WA 008145		7.99-	192.56
11/10	11/09	VISA - 11/08 CIRCLE K # 09524 LAS VEGAS NV 008936		40.00-	152.56
11/10		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	202.56
11/10		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, GAMESTOP #6427 1735 GAMESTOP #		14.13-	188.43
11/10		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		30.00-	158.43
11/10		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	238.43
11/10		POINT OF SALE PURCHASE			
		US NV LOGANDALE, SHELL SERVICE STATIO SHELL SERVICE		44.39-	194.04
11/10	11/11	VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	179.05
11/12	11/10	POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		9.07-	169.98
11/12	11/11	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	219.98

Checking, Continued

Statement Period: November 01, 2020 - November 30, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
11/12	11/11	POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		40.00-	179.98
11/12	11/10	VISA - 11/08 RESTAURANT DEPOT LAS VEGAS NV 008053		23.10-	196.88
11/12	11/11	VISA - 11/09 HARRIS AND HARRIS 312-2512300 IL 009719		119.00-	87.88
11/12		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	187.88
11/12		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		44.39-	93.49
11/12		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		30.00-	63.49
11/13		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		37.51-	25.98
11/13		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		20.00	45.98
11/13		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		9.75-	36.23
11/14	11/13	VISA - 11/11 MCDONALD'S F25614 LAS VEGAS NV 011361		8.33-	27.90
11/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		40.00	67.90
11/14		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		34.26-	33.64
11/16		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,931.00	1,964.64
11/16		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		1,000.00-	964.64
11/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	1,164.64
11/16		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SIN CITY WHOLESALE T SIN CITY		398.00-	766.64
11/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		150.00	916.64
11/16		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		39.07-	877.57
11/16		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		45.00-	832.57
11/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	862.57
11/16		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		25.99-	836.58
11/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	916.58
11/17		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		20.00-	896.58
11/17		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		43.26-	853.32
11/18	11/17	VISA - 11/16 CMC TIRE - VEGAS N LAS VEGAS NV 016363		126.26-	727.06
11/18	11/17	VISA - 11/16 ALLSTATE *PAYMENT 800-255-7828 IL 016657		194.80-	532.26
11/18	11/17	VISA - 11/16 PROGRESSIVE INS 855-756-0945 OH 016564		498.85-	33.41
11/18		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	133.41
11/18		POINT OF SALE PURCHASE			
		US NV N LAS VEGAS, BIG 5 SPORTING 254 BIG 5 SPORTIN		97.50-	35.91
11/18		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		40.00	75.91
11/18		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, SHELL SERVICE STATIO SHELL SER		50.56-	25.35
11/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	105.35
11/19		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, SHELL SERVICE STATIO SHELL SERVICE		41.97-	63.38
11/20		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,551.00	1,614.38
11/20		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	1,114.38
11/20		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		100.00-	414.38
11/20		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		200.00-	214.38
11/20		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		46.57-	167.81
11/20		POINT OF SALE PURCHASE			
		US NV LAS VEGAS, CHEVRON/TERRIBLE HER 6011 BOLLINGE		3.98-	163.83
11/20		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, 7-ELEVEN 4240 E CRAIG RD		4.56-	159.27
11/20		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		11.57-	147.70
11/21		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		316.00	463.70
11/21		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		300.00	763.70
11/21		POINT OF SALE PURCHASE			
		US NV NORTH LAS VEG, CITY EXPRESS #5 3820 E CRAIG R		40.00-	723.70

Checking, Continued

Statement Period: November 01, 2020 - November 30, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
11/23	11/22	VISA - NV LAS VEGAS, SOUTHWEST GAS CORPOR E COMMERCE GR		106.27-	617.83
11/23	11/22	POINT OF SALE PURCHASE US NV NORTH LAS VEG, O'REILLY AUTO PART		16.23-	601.60
11/23	11/22	POINT OF SALE PURCHASE US NV NORTH LAS VEG, ARCO #4284 5575 N 5TH ST		10.05-	591.55
11/23	11/22	POINT OF SALE PURCHASE US NV NORTH LAS VEG, 7-ELEVEN 5180 LOSEE ROAD		9.15-	582.40
11/23	11/22	VISA - 11/19 MCDONALD'S F25614 LAS VEGAS NV 019262		15.13-	567.27
11/23	11/22	VISA - 11/20 TACO BELL 031911 LAS VEGAS NV 020464		25.73-	541.54
11/23	11/22	VISA - 11/21 CNLV UTILITIES DEPT WEB PAYMENTUS.COM NV 021		137.06-	404.48
11/23	11/22	VISA - 11/21 COX LAS VEGAS COMM SV 800-234-3993 NV 021313		316.00-	88.48
11/23		POINT OF SALE PURCHASE US NV LAS VEGAS, MAVERIK #456 10490 BERMUDA ROAD		35.00-	53.48
11/23		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		2.50-	50.98
11/24		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	100.98
11/24		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		37.50-	63.48
11/24		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		11.57-	51.91
11/25		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	101.91
11/25		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		41.57-	60.34
11/25		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		134.18	194.52
11/25		POINT OF SALE PURCHASE US NV LAS VEGAS, WAL-MART #2463 6973 BLUE DIAMOND		134.18-	60.34
11/25		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	110.34
11/25		POINT OF SALE PURCHASE US NV NORTH LAS VEG, 7-ELEVEN 4240 E CRAIG RD		54.56-	55.78
11/27	11/26	POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STAT		9.07-	46.71
11/27		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		949.00	995.71
11/27	11/26	VISA - 11/24 MCDONALD'S F35219 NORTH LAS VEG NV 024551		7.90-	987.81
11/27	11/25	VISA - 11/24 CHEVRON 0209891 LAS VEGAS NV 024718		50.00-	937.81
11/27		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		500.00-	437.81
11/27		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		237.00-	200.81
11/27		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		100.00-	100.81
11/27		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STAT		49.07-	51.74
11/28		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	111.74
11/28		POINT OF SALE PURCHASE US NV NORTH LAS VEG, 7-ELEVEN 4240 E CRAIG RD		75.00-	36.74
11/28		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	116.74
11/28		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		53.55-	63.19
11/28		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		229.21	292.40
11/28		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	372.40
11/28		POINT OF SALE PURCHASE US NV NORTH LAS VEG, LOWE'S #2721 2570 EAST CRAIG R		55.01-	317.39
11/28		POINT OF SALE PURCHASE US NV LAS VEGAS (N), WAL-MART SUPER CEN		16.08-	301.31
11/30	11/29	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	501.31
11/30	11/29	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		83.00	584.31
11/30		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		39.07-	545.24
11/30		POINT OF SALE PURCHASE US NV NORTH LAS VEG, 7-ELEVEN 4240 E CRAIG RD		9.53-	535.71
11/30		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		17.24-	518.47
		ENDING BALANCE			518.47

Checking Summary

Item	Amount	Item	Amount	Item	Amount	Item	Amount
VISA	42.16	VISA	49.74	VISA	14.99	VISA	316.00
VISA	30.19	VISA	62.79	VISA	126.26	VISA	106.27
VISA	74.78	VISA	23.10	VISA	194.80	VISA	7.90
VISA	86.70	VISA	40.00	VISA	498.85	VISA	50.00
VISA	37.63	VISA	7.99	VISA	15.13	VISA	14.99
VISA	9.95	VISA	119.00	VISA	25.73		
VISA	30.01	VISA	8.33	VISA	137.06		

Checking Summary, Continued

Total Checks and Visa Checking: 2,130.35 **Total Withdrawals:** 7,734.45 **Total Deposits:** 10,043.43

Excess Usage Fee Calculation

Service Provided	Unit Price	VOLUME Free	VOLUME Charged	Service Fee
Deposits	0.150	2	0	0.00
Coins	0.035%	500	77	0.02
Withdrawals	0.035%	10,000	9,500	0.00
Total Service Charge				0.02

This service charge will be assessed against your account and will appear on your next statement.
Excess charges are assessed when you exceed the allowable number of transactions.
If you have any questions concerning this charge please contact Business Services.

AMERICA FIRST
CREDIT UNION

STATEMENT

America First Federal Credit Union · 1-800-999-3961 · americafirst.com
P.O. Box 9199, Ogden, UT 84409

#BWNCHEQ
#847EXQU100639337#
EXQUISITE TOWING ROADSIDE ASSISTANCE LLC
5321 CHINO HEIGHTS ST
NORTH LAS VEGAS NV 89081

Statement Date: December 31, 2020
Account Number: [redacted]3748

fyi for your information

We updated the America First Membership & Account Agreement, as well as our Privacy Policy, to reflect new information about your and our rights and responsibilities concerning your accounts. Visit **americafirst.com** to review the documents online or contact us for printed copies.

A Summary of Your Accounts

	Ending Balance	2020 Dividends
Share Savings	2,769.45	0.45
Checking	182.42	0.00
Total:	**2,951.87**	**0.45**

A Summary of Your Loans

	Ending Balance	Total Amount Due	Next Payment	2020 Interest

Share Savings

Statement Period: December 01, 2020 - December 31, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
		BEGINNING BALANCE		1,073.55
12/01		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	1,023.68
12/02		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	923.68
12/02		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	893.68
12/03		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	793.68
12/03		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	693.68
12/04		SHARE TRANSFER FROM CHECKING	500.00	1,193.68
12/04		MOBILE BANKING SHARE TRANSFER FROM CHECKING	500.00	1,693.68
12/04		DEPOSIT	350.00	2,043.68
12/04		OFFICIAL CHECK 135042333 TO COSTELLO REALTY	1,465.00-	578.68
12/04		OFFICIAL CHECK 135042334 TO COSTELLO REALTY	90.00-	488.68
12/04		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	408.68
12/05		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	378.68
12/05		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	318.68
12/07		MOBILE BANKING SHARE TRANSFER TO CHECKING	140.00-	178.68
12/08		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	118.68
12/11		MOBILE BANKING SHARE TRANSFER FROM CHECKING	1,900.00	2,018.68
12/12		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	1,968.68
12/12		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	1,768.68
12/14	12/13	MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,668.68
12/14	12/13	MOBILE BANKING SHARE TRANSFER TO CHECKING	498.00-	1,170.68
12/14	12/13	MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,070.68
12/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	1,020.68
12/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	261.29-	759.39
12/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	79.95-	679.44

Share Savings, Continued

Statement Period: December 01, 2020 - December 31, 2020

Post Date	Effective Date	Transaction Description	Transaction Amount	Account Balance
12/14		MOBILE BANKING SHARE TRANSFER TO CHECKING	15.00-	664.41
12/15		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	614.41
12/15		MOBILE BANKING SHARE TRANSFER TO CHECKING	70.00-	544.41
12/16		MOBILE BANKING SHARE TRANSFER TO CHECKING	80.00-	464.41
12/17		MOBILE BANKING SHARE TRANSFER FROM CHECKING	950.00	1,414.41
12/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	70.40-	1,344.01
12/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	151.73-	1,192.28
12/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	119.21-	1,073.07
12/17		MOBILE BANKING SHARE TRANSFER TO CHECKING	40.00-	1,033.07
12/18		MOBILE BANKING SHARE TRANSFER FROM CHECKING	1,500.00	2,533.07
12/19	12/18	MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	2,333.07
12/19	12/18	MOBILE BANKING SHARE TRANSFER FROM CHECKING	200.00	2,533.07
12/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	130.00-	2,403.07
12/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	2,343.07
12/19		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	2,293.07
12/21		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	2,263.07
12/21		MOBILE BANKING SHARE TRANSFER TO CHECKING	217.00-	2,046.07
12/21		MOBILE BANKING SHARE TRANSFER TO CHECKING	200.00-	1,846.07
12/21		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	1,746.07
12/24		MOBILE BANKING SHARE TRANSFER FROM CHECKING	1,200.00	2,946.07
12/24		MOBILE BANKING SHARE TRANSFER TO CHECKING	100.00-	2,846.07
12/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	226.68-	2,619.39
12/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	2,569.39
12/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	30.00-	2,539.39
12/29		MOBILE BANKING SHARE TRANSFER TO CHECKING	60.00-	2,479.39
12/30		WITHDRAWAL	160.00-	2,319.39
12/30		MOBILE BANKING SHARE TRANSFER TO CHECKING	50.00-	2,269.39
12/31		MOBILE BANKING SHARE TRANSFER FROM CHECKING	500.00	2,769.39
12/31	01/01	DIVIDEND EARNED FOR PERIOD OF 12/01/2020 THROUGH 12/31/2020		
		ANNUAL PERCENTAGE YIELD EARNED IS 0.05%	.06	2,769.45
		ENDING BALANCE		2,769.45

Checking

Statement Period: December 01, 2020 - December 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
		BEGINNING BALANCE			518.47
12/01	11/30	POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STAT		35.00-	483.47
12/01	11/30	VISA - 11/28 MCDONALD'S F28778 NORTH LAS VEG NV 028550		8.44-	475.03
12/01	11/30	VISA - 11/26 EZPAWN 14115 NORTH LAS VEG NV 028749		229.21-	245.82
12/01	11/30	BUSINESS SERVICE CHARGES		.02-	245.80
12/01		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER 6011 BOLLINGE		14.16-	231.64
12/01		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	281.64
12/01		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		40.00-	241.64
12/02	12/01	VISA - 11/29 METROPCS 8303 N LAS VEGAS NV 029742		219.84-	21.80
12/02		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	121.80
12/02		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		51.21-	70.59
12/02		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	100.59
12/02		POINT OF SALE PURCHASE US NV NORTH LAS VEG, 7-ELEVEN 4240 E CRAIG RD		28.61-	71.98
12/02		POINT OF SALE PURCHASE US NV NORTH LAS VEG, REBEL #213 4240 E CRAIG		20.00-	51.98
12/03		VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	36.99
12/03		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	136.99
12/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		46.57-	90.42
12/03		POINT OF SALE PURCHASE US NV NORTH LAS VEG, 7-ELEVEN 4240 E CRAIG RD		9.98-	80.44
12/03		POINT OF SALE PURCHASE US NV NORTH LAS VEG, ARCO #4258 300 W LAKE ME		8.24-	72.20

Checking, Continued

Statement Period: December 01, 2020 - December 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
12/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		15.29-	56.93
12/03		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	156.93
12/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		40.47-	116.46
12/03		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		30.00-	86.46
12/04		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		1,108.00	1,194.46
12/04	12/03	VISA - 12/01 MCDONALD'S F35219 NORTH LAS VEG NV 001000		7.80-	1,186.66
12/04	12/03	VISA - 12/01 MCDONALD'S F35219 NORTH LAS VEG NV 001602		11.02-	1,175.64
12/04		FUNDS TRANSFER TO SHARE SAVINGS		500.00-	675.64
12/04		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		500.00-	175.64
12/04		DEPOSIT		350.00	525.64
12/04		FUNDS TRANSFER REVERSAL		350.00-	175.64
12/04		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		11.57-	164.07
12/04		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	244.07
12/04		POINT OF SALE PURCHASE US NV NORTH LAS VEG, 7-ELEVEN 4240 E CRAIG RD		9.31-	234.76
12/04		POINT OF SALE PURCHASE US NV NORTH LAS VEG, REBEL #213 4240 E CRAIG		30.00-	204.76
12/05		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	254.76
12/05		POINT OF SALE PURCHASE US NV NORTH LAS VEG, HAHN'S WORLD OF SURF 2908 E LA		57.16-	197.60
12/05		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	257.60
12/05		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		49.07-	208.53
12/07	12/06	VISA - 12/03 MCDONALD'S F35219 NORTH LAS VEG NV 003752		7.90-	200.63
12/07	12/06	VISA - 12/04 MCDONALD'S F35219 NORTH LAS VEG NV 004220		22.40-	178.23
12/07		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STAT		11.57-	166.66
12/07		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		4.39-	162.27
12/07		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STAT		40.00-	122.27
12/07		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		140.00	262.27
12/08	12/07	VISA - 12/05 COMFORT INN AND SUITES LAS VEGAS NV 004905		106.22-	156.05
12/08		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	216.05
12/08		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		42.17-	173.88
12/09		DEPOSIT		136.04	309.80
12/09		WITHDRAWAL		36.00-	273.80
12/09		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		40.00-	233.80
12/09		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		45.00-	188.80
12/10	12/09	VISA - 12/07 MCDONALD'S F22396 LAS VEGAS NV 007206		7.90-	180.90
12/10	12/09	VISA - 12/08 MCDONALD'S F900 NORTH LAS VEG NV 008135		12.66-	168.24
12/10	12/09	VISA - 12/07 METROPCS 8303 N LAS VEGAS NV 007230		140.00-	28.24
12/10	12/11	VISA - WA MSBILL.INFO, MICROSOFT*ULTIMATE 1 --		14.99-	13.25
12/11		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		2,120.00	2,133.25
12/11		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		1,900.00-	233.25
12/11		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		41.57-	191.68
12/11		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STAT		61.57-	130.11
12/12		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	180.11
12/12		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	380.11
12/12		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, GREEN VALLEY-357473 5180 N. LAMB B		203.00-	177.11
12/12		NON-AFCU ATM TRANSACTION FEE		1.50-	175.61
12/12		POINT OF SALE PURCHASE US NV NORTH LAS VEG, ARCO #4284 5575 N 5TH ST		34.63-	140.98
12/14	12/13	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	240.98
12/14	12/13	STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, CITY EXPRESS 3820 E CRAIG RD		102.75-	138.23
12/14	12/13	NON-AFCU ATM TRANSACTION FEE		1.50-	136.73
12/14	12/13	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		496.00	632.73
12/14	12/13	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	732.73
12/14	12/13	VISA - 12/11 MCDONALD'S F35219 NORTH LAS VEG NV 011522		36.46-	696.27
12/14	12/13	VISA - 12/11 CASH APP*HERMAN 8774174551 CA 011427		60.00-	636.27
12/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	686.27
12/14		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		40.00-	646.27

Checking, Continued

Statement Period: December 01, 2020 - December 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
12/14		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		13.76-	634.51
12/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		261.29	895.80
12/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		79.85	975.65
12/14		POINT OF SALE PURCHASE US NV HENDERSON, BATTERY XCHANGE #B		347.94-	627.71
12/14		POINT OF SALE PURCHASE US NV HENDERSON, BATTERY XCHANGE #B		2.88-	624.83
12/14		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		31.89-	592.94
12/14		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		15.00	607.94
12/15	12/14	VISA - 12/13 CNLV UTILITIES DEPT WEB PAYMENTUS.COM NV 014		100.00-	507.94
12/15		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	557.94
12/15		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		41.57-	516.37
12/15		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		70.00	586.37
12/15		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		61.57-	524.80
12/16	12/15	VISA - 12/14 PROGRESSIVE INS 855-758-0945 OH 013874		498.85-	25.95
12/16		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		80.00	105.95
12/16		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		30.00-	75.95
12/16		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		40.00-	35.95
12/17	12/16	VISA - 12/14 MCDONALD'S F20902 LAS VEGAS NV 014776		8.33-	27.62
12/17		PEER TO PEER TRANSFER CA VISA DIRECT, CASH APP*CASH OUT		952.94	980.56
12/17		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		950.00-	30.56
12/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		70.45	101.01
12/17		POINT OF SALE PURCHASE US NV LAS VEGAS, SP1992 - MEADOWS S		70.43-	30.58
12/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		151.73	182.31
12/17		POINT OF SALE PURCHASE US NV LAS VEGAS, FOOT LOCKER 07142		151.73-	30.58
12/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		119.21	149.79
12/17		POINT OF SALE PURCHASE US NV LAS VEGAS, FOOT LOCKER 07306		119.21-	30.58
12/17		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		40.00	70.58
12/18		AUTOMATIC DEPOSIT, COPART SALVAGE ISURPAYMENT CCD		1,558.00	1,628.58
12/18		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		1,500.00-	128.58
12/18		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE BER CHEVRON/TERRI		40.00	88.58
12/19	12/18	MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	288.58
12/19	12/18	MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		200.00-	88.58
12/19	12/18	VISA - 12/17 BP OF LAS VEGAS #76 N LAS VEGAS NV 018510		24.50-	64.16
12/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		130.00	194.16
12/19		POINT OF SALE PURCHASE US NV NORTH LAS VEG, AT&T C2BH 71780		71.19-	122.97
12/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	182.97
12/19		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	232.97
12/19		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STAT		45.00-	187.97
12/21	12/20	VISA - 12/18 CHEVRON 0207119 LAS VEGAS NV 018032		40.02-	147.95
12/21		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		41.57-	106.38
12/21		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	136.38
12/21		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		217.00	353.38
12/21		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		200.00	553.38
12/21		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	653.38
12/21		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		51.57-	601.81
12/22	12/21	VISA - 12/19 AT&T C2BH 71780 NORTH LAS VEG NV 019087		22.95-	578.86
12/22	12/21	VISA - 12/19 AT&T C2BH 71780 NORTH LAS VEG NV 019561		27.64-	551.22
12/22		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		2.50-	548.72
12/22		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		51.57-	497.15
12/23	12/22	VISA - 12/21 CASH APP*HERMAN 8774174551 CA 021059		20.00-	477.15
12/23	12/22	VISA - 12/21 CASH APP*HERMAN 8774174551 CA 021685		20.00-	457.15
12/23	12/22	VISA - 12/21 CMC TIRE - VEGAS N LAS VEGAS NV 021017		38.79-	418.36
12/23		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		9.07-	409.29
12/23		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		30.00-	379.29
12/23		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		44.89-	334.40
12/24		AUTOMATIC DEPOSIT, COPART SALVAGE ISURPAYMENT CCD		1,241.00	1,575.40
12/24	12/23	VISA - 12/21 MCDONALD'S F35219 NORTH LAS VEG NV 021884		7.90-	1,567.50
12/24	12/23	VISA - 12/22 COX LAS VEGAS COMM SV 800-234-3993 NV 021853		217.00-	1,350.50
12/24		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		1,200.00-	150.50
12/24		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		44.07-	106.43
12/24		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		100.00	206.43
12/24		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		49.07-	157.36

Checking, Continued

Statement Period: December 01, 2020 - December 31, 2020

Post Date	Effective Date	Transaction Description	Check Number	Transaction Amount	Account Balance
12/24		POINT OF SALE PURCHASE US NV LAS VEGAS, SHELL SERVICE STAT		40.00-	117.56
12/26	12/24	VISA - 12/23 CASH APP*MATTHEW WI 8774174551 CA 023958		5.00-	112.56
12/26	12/24	VISA - 12/22 MCDONALD'S F25614 LAS VEGAS NV 022577		8.33-	104.23
12/26	12/25	VISA - 12/24 MCDONALD'S F20902 LAS VEGAS NV 024550		8.33-	95.90
12/26	12/25	VISA - 12/24 FRY'S ELECTRONICS #27 LAS VEGAS NV 024129		17.32-	78.58
12/28	12/27	VISA - 12/26 AGI*METRO PHP CLAIM 800-316-2075 FL 025593		50.00-	28.58
12/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		226.68	255.26
12/29		POINT OF SALE PURCHASE US NV LAS VEGAS, WAL-MART #2483 6973 BLUE DIAMOND		226.68-	28.58
12/29		POINT OF SALE PURCHASE US NV LAS VEGAS, 6973 BLUE DIAMOND		28.10-	.48
12/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	50.48
12/29		POINT OF SALE PURCHASE US NV LAS VEGAS, CHEVRON/TERRIBLE HER CHEVRON/TERRI		50.18-	.30
12/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		30.00	30.30
12/29		POINT OF SALE PURCHASE US WA REDMOND, MICROSOFT 1 MICROSOFT WAY		7.99-	22.31
12/29	12/30	POINT OF SALE PURCHASE US WA MSBILL.INFO, MICROSOFT*XBOX --		7.99-	14.32
12/29		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		60.00	74.32
12/29		STAR NETWORK ATM WITHDRAWAL US NV LAS VEGAS, GREEN VALLEY-357453 530 E CRAIG		63.00-	11.32
12/29		NON-AFCU ATM TRANSACTION FEE		1.50-	9.82
12/30		MOBILE BANKING FUNDS TRANSFER FROM SHARE SAVINGS		50.00	59.82
12/30		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STAT		45.00-	14.82
12/31		AUTOMATIC DEPOSIT, COPART SALVAGE ISUBPAYMENT CCD		685.00	699.82
12/31	12/30	VISA - 12/30 MICROSOFT*XBOX 800-6427676 WA 029646		7.99-	691.83
12/31		MOBILE BANKING FUNDS TRANSFER TO SHARE SAVINGS		500.00-	191.83
12/31		POINT OF SALE PURCHASE US NV NORTH LAS VEG, SHELL SERVICE STAT		9.21-	182.62
		ENDING BALANCE			182.62

Checking Summary

Item	Amount	Item	Amount	Item	Amount	Item	Amount
VISA	8.44	VISA	140.00	VISA	40.02	VISA	5.00
VISA	229.21	VISA	12.66	VISA	22.95	VISA	8.33
VISA	219.84	VISA	36.46	VISA	27.64	VISA	17.32
VISA	7.90	VISA	60.00	VISA	7.90	VISA	50.00
VISA	11.02	VISA	14.95	VISA	20.00	VISA	7.99
VISA	7.90	VISA	100.00	VISA	20.00	VISA	14.99
VISA	22.40	VISA	8.33	VISA	38.79		
VISA	106.22	VISA	498.85	VISA	8.33		
VISA	7.90	VISA	24.50	VISA	217.00		

Total Checks and Visa Checking: 2,022.88 **Total Withdrawals:** 10,673.44 **Total Deposits:** 12,360.27

Annual Notification: Pursuant to the Membership and Account Agreement which you received at account opening, you authorize us to check your financial information, data and employment history by any means allowed by law, including obtaining credit reports and credit scores from third parties, including consumer reporting agencies from time to time to determine your eligibility for accounts and services we may offer or that you request.

Volunteer Service Opportunities

In accordance with America First bylaws, three members will be elected to three-year terms on our Board of Directors at the Annual Meeting on April 20, 2021. Incumbent volunteers are David McConkie, Cathy Person and John Spease.

Those interested in becoming Directors must have membership in good standing, be 18 years or older, bondable, free from any conflicts of interest, and remain available for all related meetings. Please submit your application online and a statement of qualification (limited to 150 words) by 5 p.m. on January 8, 2021. Visit americafirst.com/volunteers to complete the process.

Nominations for Board vacancies are also accepted by petitions signed by at least 500 members. Nominees must submit qualification statements with 150-word limits, biographical data, and signed certificates stating they are agreeable to nomination and will serve if elected. Such petitions must be received by 5 p.m. on March 1, 2021. Election balloting will not be conducted if there is one nominee for each open position. Nominations from the floor will not be accepted at the meeting.

PAYMENT INSTRUCTIONS

Payment Plan: If you wish to discuss a payment plan or the status of your account, contact one of our taxpayer representatives at our Hartford, CT office at (860) 724-9100 or (866) 497-2427 between 8:30 AM and 5:00 PM, Eastern Time, Monday thru Friday. Please review the Taxpayer Information Sheet enclosed before telephoning. Please also have your reference number ready when you call.

If you need a DMV Release: For issuance of a DMV release the entire tax bill(s) must be paid in full with good funds, either by certified check, bank check, cashier's check or money order and must be mailed to TaxServ Capital Services, LLC (TaxServ) at the address provided below. You also may make an online payment at www.taxserv.com. You will need your reference number to make an online payment. Online payments are not posted by TaxServ for a minimum of 48 hours (excluding weekends and holidays) until funds are received. TaxServ provides the Town with a payment report weekly in arrears. The Town will not issue a DMV release until the Town receives and posts the payment received by TaxServ, which remains the system of record (with no exception). The DMV is notified by the Tax Collector's office of the release. If you pay with a personal check and if the check is returned for insufficient funds or any other reason, you will be charged a $20.00 returned check fee.

Credit Card : Please visit www.taxserv.com. Click **PAY ONLINE** and read through and **AGREE** to the terms and conditions. Once you click **AGREE**, select **Fairfield County** and then **Danbury** to begin. A convenience fee will be charged by the processor for all payments made online.

Send Payment by Mail: If you send a payment by mail, you must include the payment coupon below. Make your check or money order payable to **"TaxServ Capital Services – DB"**. On the check or money order write your **reference number(s)** (including the leading letters) and send to:

TAXSERV CAPITAL SERVICES, LLC
400 N. CONGRESS AVE, SUITE 101
WEST PALM BEACH, FL 33401-2933

NO CASH WILL BE ACCEPTED BY MAIL.

If you have any questions, please contact us Toll Free at (866) 497-2427 M-F 8:00 AM - 5:00 PM (Eastern Time)

PLEASE CUT ALONG DOTTED LINE AND MAIL WITH YOUR CHECK

Please return this portion with your payment.

DBH58-362690

WILLIAMS HERMAN G JR
4018 ADABELLA AVE 204
LAS VEGAS NV 89115-1612

Reference Number(s):
(Número de Referencia)
DB362690

Payment Due Date: March 31, 2019
(Payments made after this date are subject to additional interest)

Amount Due: **$301.52**

Amount Paid: _____

Check #: _____

Please indicate any address/phone number changes below:

New Address:

_____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____

MAIL YOUR PAYMENT TO:

TAXSERV CAPITAL SERVICES, LLC
400 N. CONGRESS AVE, SUITE 101
WEST PALM BEACH, FL 33401-2933

MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO:

TAXSERV CAPITAL SERVICES – DB

*PLEASE WRITE YOUR **REFERENCE NUMBER(S)** ON YOUR CHECK OR MONEY ORDER.*

NO CASH WILL BE ACCEPTED BY MAIL.

RE: Delinquent City of Danbury MV Tax Payment

SED EXHIBIT

HGW 346

CREDIT COLLECTION SERVICES

725 Canton Street, Norwood, MA 02062
Self-service: www.ccspayment.com
Monday - Friday: 8:00AM-8:00PM, Saturday: 9:00AM-5:30PM, ET

CALL CENTER: (617) 581-1083

Date: 01/29/20
File Number: 08 0742 37567
Pin Number: 93103
7160696182

153474 1 AV 0.386 T 355
GUARDIAN OF A WILLIAMS
4018 ADABELLA AVE APT 204
LAS VEGAS NV 89115-1613

Test(s) ordered by:
JACKSON-CLARK,DAVITA

CREDITOR:	AMOUNT OF THE DEBT:
QUEST DIAGNOSTICS INCORPORATED	$1,698.48

According to our client, the above referenced amount remains unpaid. As a result, your account has been placed with this office for collection. We look forward to working with you to resolve this matter. Thank you.

Federal Law: Unless you notify this office within 30 days after receiving this notice that you dispute the validity of this debt, or any portion thereof, this office will assume this debt is valid. If you notify this office in writing within 30 days from receiving this notice that you dispute the validity of this debt, or any portion thereof, this office will obtain verification of the debt or obtain a copy of a judgment and mail you a copy of such judgment or verification. If you request of this office in writing within 30 days after receiving this notice, this office will provide you with the name and address of the original creditor, if different from the current creditor. This is an attempt to collect a debt and any information obtained will be used for that purpose. This communication is from a debt collector.

SELF-SERVICE WEBSITE: You can activate email messaging, upload correspondence, request telephone calls to stop, pay by check, Visa, MasterCard, Discover, arrange a payment plan, and more at our secure website: **www.ccspayment.com**.

CALL CENTER: You can receive personal attention from a Customer Service Agent during the hours referenced at the top of this notice: (617) 581-1083.

MAIL PAYMENT: You can mail your check together with the payment stub portion of this notice. You can make your check payable to: QUEST DIAGNOSTICS INCORPORATED.

MAIL OR FAX CORRESPONDENCE: You can mail correspondence to: CCS P.O. Box 337, Norwood, MA 02062-0337 or fax to: (617) 658-5714. You can include a copy of this notice to avoid processing delays.

0090-NV

File Number: 08 0742 37567
Pin Number: 93103
Guardian of A WILLIAMS

AMOUNT OF THE DEBT:
$1,698.48

Do not mail post-dated checks. You can call (617) 581-1083 for personal attention. CCS may process payment as a one-time electronic funds withdrawal using information from your check.

Go Green

We offer secure email messaging, as well as the ability to pay or send correspondence online. It's quick, easy, and helps protect the environment. Please consider visiting our self-service website at: **www.ccspayment.com**.

CCS
PAYMENT PROCESSING CENTER
P.O. BOX 55126
BOSTON, MA 02205-5126

ED EXHIBIT

898880090074237567001[illegible]947

CREDIT COLLECTION SERVICES

725 Canton Street, Norwood, MA 02062
Self-service: www.ccspayment.com
Monday - Friday: 8:00AM-8:00PM, Saturday: 9:00AM-5:30PM, ET

CALL CENTER: (617) 581-1083

Date: 03/01/20
File Number: 08 0742 37567
Pin Number: 93103

193259 1 AB 0.416 T 371
GUARDIAN OF A WILLIAMS
4018 ADABELLA AVE APT 204
LAS VEGAS NV 89115-1613

Test(s) ordered by:
JACKSON-CLARK,DAVITA

CREDITOR:	AMOUNT OF THE DEBT:
QUEST DIAGNOSTICS INCORPORATED	$1,698.48

Thank you for your attention at this time. As of 03/01/20, our records indicate that your past-due account remains unpaid. Please respond to this notice.

Please remit payment by mail (together with the payment stub portion of this notice), by telephone, or by visiting our self-service website @ **www.ccspayment.com**. If you would like to make suitable payment arrangements, our Customer Service Agents are available at (617) 581-1083. Let's work together to resolve this matter. Thank you.

Once full payment has been posted by this office, your account will be closed and returned to your creditor as paid-in-full. We are required to make the following statement: This is an attempt to collect a debt and any information obtained will be used for that purpose. This communication is from a debt collector.

SELF-SERVICE WEBSITE: You can activate email messaging, upload correspondence, request telephone calls to stop, pay by check, Visa, MasterCard, Discover, arrange a payment plan, and more at our secure website: **www.ccspayment.com**.

CALL CENTER: You can receive personal attention from a Customer Service Agent during the hours referenced at the top of this notice: (617) 581-1083.

MAIL PAYMENT: You can mail your check together with the payment stub portion of this notice. You can make your check payable to: QUEST DIAGNOSTICS INCORPORATED.

MAIL OR FAX CORRESPONDENCE: You can mail correspondence to: CCS P.O. Box 337, Norwood, MA 02062-0337 or fax to: (617) 658-5714. You can include a copy of this notice to avoid processing delays.

0016 - NV

File Number: 08 0742 37567
Pin Number: 93103
Guardian of A WILLIAMS

PLEASE PAY THIS AMOUNT:
$1,698.48

Do not mail post-dated checks. You can call (617) 581-1083 for personal attention. CCS may process payment as a one-time electronic funds withdrawal using information from your check.

Go Green

We offer secure email messaging, as well as the ability to pay or send correspondence online. It's quick, easy, and helps protect he environment. Please consider visiting our self-service website at: **www.ccspayment.com**.

CCS
PAYMENT PROCESSING CENTER
P.O. BOX 55126
BOSTON, MA 02205-5126

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C. Should the balance of the account become 30-day delinquent, active treatment will cease until the account is current. During this time, patient visits will not be scheduled. Visits for emergencies that may arise can be scheduled to make the patient comfortable. If minimum payments are not made and account remains delinquent, we reserve the right to discontinue treatment and turn the account over to collections. The responsible party will pay all cost and expenses, including attorney's fees and/or collection fees.

D. Our fee includes only the procedures performed in this office. Additional charges will be made for:
- Broken brackets: $25 each, $35 for clear brackets
- Broken or lost retainers and appliances
- Returned checks $50
- Office visits after the first year of retention
- Re-treatment made necessary by lack of retainer wear
- Excessive broken appointments - please call 48 hrs. in advance to cancel or reschedule appointments or cancellation fee will apply

E. **Insurance Assignment:** Please understand that our office provides only an <u>estimate</u> of the amount that the insurance policy may pay. It should be understood that our office accepts assignment of any orthodontic insurance payments and the responsible party agrees to pay, prior to the removal of braces, any portion of the fee that the insurance does not cover. **It should also be understood that the patient insurance benefit is not paid in one lump sum at the beginning of treatment.** We receive monthly payments as the treatment continues based on eligibility. Should you receive a check from the insurance company please forward that payment to our office immediately. Any unpaid insurance balances will be billed to you directly. It is your responsibility to advise us of any changes in your insurance.

APPOINTMENTS: In order to ensure quality orthodontic care, it is imperative that both parents and patients understand the manner in which we schedule your appointments. Our goal is to be the best part of your day. We make it a top priority to value both you and your time. That's why we make every effort to stay on or ahead of schedule. Most parents work and all children attend school. Inconveniencing your work schedule and interrupting your child's studies as infrequently as possible is very important to our entire office. We provide your child with school excuses for scheduled orthodontic appointments and it is important for your child to turn these in to the appropriate school official. We want you to know our staff will work hard to provide the finest orthodontic care in the most convenient scheduling system possible for you and your child. We also have families and children and understand your scheduling concerns. We will do everything we can to ensure your child's treatment goes as smoothly as possible.

- **Long Appointments, Banding and Bonding:** These are more detailed and technique - sensitive appointments. Therefore, these appointments will be scheduled during quieter morning hours.
- **Emergencies:** There are no true orthodontic emergencies. In the rare instance of trauma, patients will be seen as soon as possible and appropriate care given or referred to another specialist for treatment. If the office is closed and this is a true emergency please go to the nearest emergency room or call 911
- **Repairs:** Loose brackets, bands, broken arch wires or ties, broken appliance or retainers. These are rare and are not emergencies. Please call our office during regular business hours to schedule an appointment to make repairs. These appointments are scheduled during school hours at specific times since they are longer appointments. The vast majority of your appointments are over the course of treatment will be short. By seeing patients that require longer visits during school hours, it leaves room in our schedule to see more patients after school.
- **Appointments broken or not cancelled within 48 hours:** Another appointment will be scheduled but may require waiting 4-8 weeks for an after-school appointment. An appointment during school hours typically may be arranged sooner. We will be happy to place you on the standby list for any openings that may occur.

General Dental Care: Regular visits to your family dentist during orthodontic treatment are essential to ensure good oral health. The above treatment fee does not cover services or materials provided outside of this office.

The treatment fee does **NOT** include the followings:
- **<u>any general dental treatment that may be required, such as extractions, fillings, and cleanings</u>**
- the services of a speech pathologist, physician, surgeon, or other professional as deemed necessary
- any special appliances and x-rays that are not foreseen in the original diagnosis
- the services of an oral surgeon or other dental specialist
- in some cases, other orthodontic diagnostic aides

The treatment fee does include retainers, and six months of retention supervision. We will bill insurance, if applicable, for all records (x-rays, photos and study models). Should insurance deny or only pay a portion we will adjust the balance off as a courtesy.

Transfer/Relocation: In the event that a patient relocates during treatment, this office may assist in selecting a new orthodontist. Upon your request, duplicated records will be forwarded to the new office. The balance on your account at the time of relocation will

be calculated as follows: One third of the treatment fee is earned the day braces or appliances are places or when Invisalign impressions are taken. The remaining two thirds is divided by the estimated treatment time. This contract is not transferrable to another orthodontist. They may charge usual and customary fees for the area to which you relocate.

I, the responsible party, consent to treatment recommended by Children's Dentistry and Orthodontics. The treatment plan and potential risks have been fully explained to me by the Orthodontist and staff. I have read and understand the potential risks explained in the INFORMED CONSENT FOR THE ORTHODONTIC PATIENT. It is understood that due to the heavy reliance on patient cooperation and favorable growth in orthodontics that ideal results cannot be guaranteed. I, as the Guarantor for this account, certify that I have read and understand this agreement; and that I agree to pay Children's Dentistry and Orthodontics according to the schedule above. I agree that I am legally responsible for any outstanding balance on this account.

Responsible Party: _____
(Signature)

Date: 6/24/19

HGW 350

P.O. Box 30281
Salt Lake City, UT 84130-0281

June 20, 2020

00000715 UF

Herman Williams
41018 Ababella Ave Bvld 4 204
Las Vegas NV 89115

Re: xxxxxxxxxxxx4734
Case #: 10004544901755

Dear Herman Williams,

Thanks for contacting us about your credit report. Based on the information you gave us, we researched your account. We know your credit is important to you so we want to help you understand what we found.

You asked us to change or remove something on your credit report. When we researched your account, however, we found that the credit bureaus are not displaying this account on your credit report. This means there is no update we can make.

For more information about credit bureau reporting, please see the Credit Bureau Frequently Asked Questions on our website, www.capitalone.com/credit-cards/faq.

Sincerely,

Capital One® Credit Bureau Resolutions

This letter is for informational purposes only and is not an attempt to collect a debt.

HGW 351

DEBT RECOVERY SOLUTIONS, LLC

7/1/2020

HERMAN WILLIAMS
4018 ADABELLA AVENUE APT 204
LAS VEGAS NV 89115

Current Creditor: Pendrick Capital Partners
Original Creditor: EMPP/UNIVERSITY MEDICAL C
Account No.: 23581801
Balance Due: $1,423.00

Dear HERMAN WILLIAMS:

We are responding to your recent request for verification of the obligation referenced above. Enclosed is the documentation you requested.

We trust that this information responds to your question. Please remit payment immediately or call our customer service department at **1.800.807.4107** if further information is required.

Very truly yours,

Ms. Furman
Customer Service Coordinator

JF:cg
Enclosures

"THIS IS AN ATTEMPT TO COLLECT A DEBT AND ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE. THIS COMMUNICATION IS FROM A DEBT COLLECTOR."

PENDRICK CAPITAL PARTNERS, LLC.

Jun 26, 2020
Case #: NEJ771

WILLIAMS, HERMAN
10116 DESERT TREES ST
LAS VEGAS, NV 891418527

Patient Information

WILLIAMS, HERMAN
10116 DESERT TREES ST
LAS VEGAS, NV 891418527

Phone: (702) 613-9963
Birthday: 08/05/69

Diagnosis

1) R0789

First Symptom: 00/00/00

Hospitalized: 06/29/17 to 06/29/17

Refering Doctor's Name: VILLAFLOR MD CHRISTI ID:

Procedures/Charges

Dates of Service --From--	---To---	Procedure/Service CPT Code/Modifiers	Diag Code	Nbr Units	Charge
06/29/17	06/29/17	99285		0	1323.00
06/29/17	06/29/17	99053		0	100.00

Original Creditor Information

EMPP/UNIVERSITY MEDICAL CENTER
1800 W CHARLESTON BLVD
LAS VEGAS, NV 89102

ED EXHIBIT

HGW 353

Current Creditor Information

Pendrick Capital Partners, LLC
2331 Mill Rd.
Suite 510
Alexandria, VA 22314

Financial Information

Current Balance: 1423.00

HGW 354

Digestive Associates LLP
840 S RANCHO DR
STE 4
LAS VEGAS, NV 89106
Forward Service Requested

Please complete payment information. 97 110182

Account No.	Statement Date	Payment Due
[redacted]273	2020-01-01	305.47
Mail Pay	Enter Payment Amount	$
by Check	Payable To: Digestive Associates LLP	Check No.

For Billing Inquiries Call: 888-344-7837
Patient: Herman G Williams

002450

TRI90Z 1645994 771876772
Herman G Williams
4018 ADABELLA AVE
APT 204
LAS VEGAS NV 89115-1613

Digestive Associates LLP
840 S RANCHO DR
STE 4
LAS VEGAS, NV 89106

☐ Check if your billing information has changed.
Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Statement Detail **Statement Date 2020-01-01** **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2020-01-01	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214300	2018-11-22	2020-01-01	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2020-01-01	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214323	2018-11-23	2020-01-01	Your Balance Due On These Se...			

Digestive Associates LLP
840 S RANCHO DR
STE 4
LAS VEGAS, NV 89106
Forward Service Requested

Account No.	Statement Date		Payment Due
[redacted]273	2020-01-28		305.47
Mail Pay	Enter Payment Amount		$
by Check	Payable To: Digestive Associates LLP		Check No.

For Billing Inquiries Call: 888-344-7837
Patient: Herman G Williams

035570

TRI90Z 1682723 785663904
Herman G Williams
4018 ADABELLA AVE
APT 204
LAS VEGAS NV 89115-1613

Digestive Associates LLP
840 S RANCHO DR
STE 4
LAS VEGAS, NV 89106

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Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Statement Detail **Statement Date 2020-01-28** **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2020-01-28	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214300	2018-11-22	2020-01-28	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2020-01-28	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214323	2018-11-23	2020-01-28	Your Balance Due On These Services ...			106.85

Aging	Current	31 - 60	61 - 90	91 - 120	120+
	0.00	0.00	0.00	0.00	305.47

Payment Due
305.47

Digestive Associates LLP
840 S RANCHO DR
STE 4-342
LAS VEGAS, NV 89106
Forward Service Requested

Please complete payment information. 97 110162

Account No.	Statement Date	Payment Due
[redacted]4273	2020-02-27	305.47
Mail Pay	Enter Payment Amount	$
by Check	Payable To: Digestive Associates LLP	Check No.

For Billing Inquiries Call: 888-344-7837
Patient: Herman G Williams

030894
TRI90Z 1721228 801241163
Herman G Williams
4018 ADABELLA AVE
APT 204
LAS VEGAS NV 89115-1613

Digestive Associates LLP
840 S RANCHO DR
STE 4-342
LAS VEGAS, NV 89106

☐ Check if your billing information has changed.
Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Statement Detail **Statement Date 2020-02-27** **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2020-02-27	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214300	2018-11-22	2020-02-27	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2020-02-27	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214323	2018-11-23	2020-02-27	Your Balance Due On These Services ...			106.85

Aging	Current	31 - 60	61 - 90	91 - 120	120+
	0.00	0.00	0.00	0.00	305.47

Payment Due
305.47

HGW 357

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106
Forward Service Requested

Account No.	Statement Date	Payment Due
164273	2020-04-04	305.47
Mail Pay	Enter Payment Amount	$
by Check	Payable To: Digestive Associates LLP	Check No.

For Billing Inquiries Call: 888-344-7837
Patient: Herman G Williams

062424

TRI90Z 1769388 820933651
Herman G Williams
4018 ADABELLA AVE
APT 204
LAS VEGAS NV 89115-1613

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106

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Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Statement Detail **Statement Date 2020-04-04** **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2019-08-28	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2019-08-28	Your Balance Due On These Services ...			106.85

Aging	Current	31 - 60	61 - 90	91 - 120	120+
	0.00	0.00	0.00	0.00	305.47

Payment Due
305.47

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106
Forward Service Requested

Please complete payment information. 97 110162

Account No.	Statement Date	Payment Due
[redacted]273	2020-04-28	305.47
Mail Pay	Enter Payment Amount	$
by Check	Payable To: Digestive Associates LLP	Check No.

For Billing Inquiries Call: 888-344-7837
Patient: Herman G Williams

024049
TRI90Z 1798965 831174947
Herman G Williams
4018 ADABELLA AVE
APT 204
LAS VEGAS NV 89115-1613

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106

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Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Statement Detail **Statement Date 2020-04-28** **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2020-04-28	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214300	2018-11-22	2020-04-28	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2020-04-28	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214323	2018-11-23	2020-04-28	Your Balance Due On These Services ...			106.85

Aging	Current	31 - 60	61 - 90	91 - 120	120+
	0.00	0.00	0.00	0.00	305.47

Payment Due
305.47

HGW 359

[redacted]
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106
Forward Service Requested

Account No.	Statement Date		
[redacted]1273	2020-05-26		305.47
Mail Pay		Enter Payment Amount	$
by Check	Payable To: Digestive Associates LLP		Check No.

For Billing Inquiries Call: 888-344-7837
Patient: Herman G Williams

019197
TRI90Z 1836175 843291378
Herman G Williams
4018 ADABELLA AVE
APT 204
LAS VEGAS NV 89115-1613

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106

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Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Statement Detail — **Statement Date 2020-05-26** — **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2020-05-26	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214300	2018-11-22	2020-05-26	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2020-05-26	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan or apply for hardship, please call us.			
214323	2018-11-23	2020-05-26	Your Balance Due On These Services ...			106.85

Aging	Current	31 - 60	61 - 90	91 - 120	120+
	0.00	0.00	0.00	0.00	305.47

Payment Due
305.47

Digestive Associates LLP
840 S RANCHO DR
[redacted]
STE 4, LB 342
LAS VEGAS, NV 89106
Forward Service Requested

Please complete payment information. 97 110182

Account No.	Statement Date	Payment Due
[redacted]4273	2020-07-13	305.47
Mail Pay	Enter Payment Amount	$
by Check	Payable To: Digestive Associates LLP	Check No.

For Billing Inquiries Call: 719-283-3616
Patient: Herman G Williams

033347

TRI902 1899863 863766382
Herman G Williams
5321 CHINO HEIGHTS ST
NORTH LAS VEGAS NV 89081-2970

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106

☐ Check if your billing information has changed.
Provide update(s) above or on the reverse side.

Please detach and return top portion with paymen

Statement Detail **Statement Date 2020-07-13** **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2019-08-28	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2019-08-28	Your Balance Due On These Services ...			106.85

Aging	Current	31 - 60	61 - 90	91 - 120	120+
	0.00	0.00	0.00	0.00	305.47

Payment Due
305.47

Digestive Associates LLP 840 S RANCHO DR STE 4, LB 342 LAS VEGAS, NV 89106

HGW 361

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106
Forward Service Requested

For billing inquiries call 719-283-3616
Business Hours: Mon. to Fri. 8 am-4:30 pm PST
Patient: Herman G Williams

Please complete payment information. 97 110162

Account No.	Statement Date	Payment Due
164273	2020-09-14	305.47

Mail Pay	Enter Payment Amount	$
by Check	Payable To: Digestive Associates LLP	Check No.
by Card	Select Card: ☐VISA ☐MC	
Card No.		Exp. Date
Signature		3-4 Digit Security Code

052505
TRI90Z 1982856 890262995
Herman G Williams
5321 CHINO HEIGHTS ST
NORTH LAS VEGAS NV 89081-2970

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106

☐ Check if your billing information has changed.
Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Please contact us at 719-283-3616 for questions about your bill.

Messages

- Payment is due upon receipt. Please pay or contact us immediately to prevent collection activity. Thank you.
- This is a statement for professional services rendered by your physcian. You may receive a separate bill from the hospital for it's services.
- To make a payment online, please visit: pay.instamed.com/DIGESTIVE.ASSOCIATES

Statement Detail **Statement Date 2020-09-14** **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2020-09-14	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan, please call us.			
214300	2018-11-22	2020-09-14	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2020-09-14	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan, please call us.			
214323	2018-11-23	2020-09-14	Your Balance Due On These Services ...			106.85

Aging	Current	31 - 60	61 - 90	91 - 120	120+
	0.00	0.00	0.00	0.00	305.47

Payment Due
305.47

HGW 362

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106
Forward Service Requested

For billing inquiries call 719-283-3616
Business Hours: Mon. to Fri. 8 am-4:30 pm PST
Patient: Herman G Williams

Please complete payment information. 97 110182

Account No.	Statement Date	Payment Due
[redacted]4273	2020-10-16	305.47

Mail Pay	Enter Payment Amount	$
by Check	Payable To: Digestive Associates LLP	Check No.
by Card	Select Card: ☐ VISA ☐ MC	
Card No.		Exp. Date
Signature		3-4 Digit Security Code

051026

TRI90Z 2029782 905631704
Herman G Williams
5321 CHINO HEIGHTS ST
NORTH LAS VEGAS NV 89081-2970

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106

☐ Check if your billing information has changed.
Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Please contact us at 719-283-3616 for questions about your bill.

Messages

- Payment is due upon receipt. Please pay or contact us immediately to prevent collection activity. Thank you.
- This is a statement for professional services rendered by your physcian. You may receive a separate bill from the hospital for it's services.
- To make a payment online, please visit: pay.instamed.com/DIGESTIVE.ASSOCIATES

Statement Detail **Statement Date 2020-10-16** **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2020-10-16	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan, please call us.			
214300	2018-11-22	2020-10-16	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2020-10-16	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan, please call us.			
214323	2018-11-23	2020-10-16	Your Balance Due On These Services ...			106.85

Aging	Current	31 - 60	61 - 90	91 - 120	120+	Payment Due
	0.00	0.00	0.00	0.00	305.47	305.47

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106
Forward Service Requested

For billing inquiries call 719-283-3616
Business Hours: Mon. to Fri. 8 am-4:30 pm PST
Patient: Herman G Williams

Please complete payment information.

Account No.	Statement Date	Payment Due
[redacted]4273	2020-12-21	305.47

Mail Pay	Enter Payment Amount	$
by **Check**	Payable To: Digestive Associates LLP	Check No.
by **Card**	Select Card: ☐ VISA ☐ MC	
Card No.		Exp. Date
Signature		3-4 Digit Security Code

029631

TRI90Z 2119321 932335521
Herman G Williams
5321 CHINO HEIGHTS ST
NORTH LAS VEGAS NV 89081-2970

Digestive Associates LLP
840 S RANCHO DR
STE 4, LB 342
LAS VEGAS, NV 89106

☐ Check if your billing information has changed.
Provide update(s) above or on the reverse side.

Please detach and return top portion with payment.

Please contact us at 719-283-3616 for questions about your bill.

Messages

- Payment is due upon receipt. Please pay or contact us immediately to prevent collection activity. Thank you.
- This is a statement for professional services rendered by your physcian. You may receive a separate bill from the hospital for it's services.
- To make a payment online, please visit: pay.instamed.com/DIGESTIVE.ASSOCIATES

Statement Detail **Statement Date 2020-12-21** **Account No. 164273**

Claim No.	Visit Date	Activity Date	Description of Service	Charges	Payments	Balance
214300	2018-11-22	2018-11-22	Claim:214300, Provider: Snehal Desai, MD			
214300	2018-11-22	2018-11-22	99254 HOSP CONS-MOD CPLX	410.00		
214300	2018-11-22	2019-08-28	CASH DISCOUNT		211.38	
214300	2018-11-22	2020-12-21	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan, please call us.			
214300	2018-11-22	2020-12-21	Your Balance Due On These Services ...			198.62
214323	2018-11-23	2018-11-23	Claim:214323, Provider: Snehal Desai, MD			
214323	2018-11-23	2018-11-23	99233 HOSP SUB CARE-HI CPLX	267.00		
214323	2018-11-23	2019-08-28	CASH DISCOUNT		160.15	
214323	2018-11-23	2020-12-21	To avoid further collection efforts, pay your account immediately! If you need to set up a payment plan, please call us.			
214323	2018-11-23	2020-12-21	Your Balance Due On These Services ...			106.85

Aging	Current	31 - 60	61 - 90	91 - 120	120+
	0.00	0.00	0.00	0.00	305.47

Payment Due
305.47

Quest Diagnostics

Do not use address below:
P.O. Box 7306
Hollister, MO 65673-7306

AB 01 001483 91696 C 4 A
NEV 88840690 1003284 7160696194 7
MATHEW WILLIAMS
4018 ADABELLA AVE APT 204
LAS VEGAS, NV 89115-1613

Laboratory Invoice

For services not included in your physician's bill

Invoice Date:	Amount Due:	Due Date:
Dec. 28, 2019	$158.74	UPON RECEIPT

Invoice Number	Lab Code
[redacted]5194	NEV

Patient Name: MATHEW WILLIAMS
Responsible Party: MATHEW WILLIAMS
Date of Service: March 30, 2019
Requested By: JACKSON-CLARK,DAVITA

FOURTH NOTICE

FINAL PAST DUE NOTICE

This is the final notice you will receive from our office. Please make payment immediately to prevent your account from being forwarded to a collection agency for further collection action.

If further action is necessary, you may also be liable for additional expenses and costs, as permitted by law, which can substantially increase the amount you owe.

Please contact us today to make payment and prevent further collection efforts.

Patient Amount Due: $158.74
Tax ID # 88-0099333

To pay your invoice 24 hours / 7 days, visit our website at www.questdiagnostics.com/bill

For billing inquiries or to pay by phone: 1-855-619-4056
Please have your invoice available for reference.
MON-TH 8:30AM-5PM;FRI 9-4PM 08:30 AM - 05:00 PM PST
Se Habla Espanol!!

If you have Medicare, Railroad Medicare or Medicaid as your primary or secondary insurance, The CPT codes provided are based on AMA guidelines and without regard to specific payor r

see reverse side.

Quest Diagnostics Incorporated and its subsidiaries (Quest) compiles with applicable Fedr basis of race, color, national origin, age, disability, or sex.

Please fold and tear along perforation and remit with pr

Quest Diagnostics

LOG ON NOW. Pay your bill online securely at
www.questdiagnostics.com/bill
or call 1-855-619-4056 .
Quest Diagnostics also accepts:

VISA MasterCard AMERICAN EXPRESS DISCOVER NETWORK

Please make checks payable to Quest Diagnostic
Be sure to include invoice number on your check

☐ Check here if address has changed.
Please provide your new address information on '
Quest Diagnostics reserves the right to assign this receivable

Quest Diagnostics™

Do not use address below:
P.O. Box 7308
Hollister, MO 65673-7308

AB 01 001484 91696 A 5 A

NEV 88640690 1003282 7160696182 7
ABIGAIL WILLIAMS
4016 ADABELLA AVE APT 204
LAS VEGAS, NV 89115-1613

Laboratory Invoice

For services not included in your physician's bill

Invoice Date:	Amount Due:	Due Date:
Dec. 28, 2019	$787.11	UPON RECEIPT

Invoice Number	Lab Code
[redacted]6182	NEV

Patient Name: ABIGAIL WILLIAMS
Responsible Party: ABIGAIL WILLIAMS
Date of Service: March 30, 2019
Requested By: JACKSON-CLARK,DAVITA

FOURTH NOTICE

FINAL PAST DUE NOTICE

This is the final notice you will receive from our office. Please make payment immediately to prevent your account from being forwarded to a collection agency for further collection action.

If further action is necessary, you may also be liable for additional expenses and costs, as permitted by law, which can substantially increase the amount you owe.

Please contact us today to make payment and prevent further collection efforts.

Patient Amount Due: $787.11
Tax ID # 88-0099333

To pay your invoice 24 hours / 7 days, visit our website at www.questdiagnostics.com/bill

For billing inquiries or to pay by phone: 1-855-619-4056
Please have your invoice available for reference.
MON-TH 8:30AM-5PM;FRI 9-4PM 08:30 AM - 05:00 PM PST
Se Habla Espanol!!

If you have Medicare, Railroad Medicare or Medicaid as your primary or secondary insurance, please send us the information - see reverse side. The CPT codes provided are based on AMA guidelines and without regard to specific payor requirements.

Quest Diagnostics Incorporated and its subsidiaries (Quest) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

001484 1/1

▲ Please fold and tear along perforation and remit with payment in the envelope provided ▲

Quest Diagnostics™

LOG ON NOW. Pay your bill online securely at
www.questdiagnostics.com/bill
or call 1-855-619-4056 .
Quest Diagnostics also accepts:

VISA MasterCard AMERICAN EXPRESS DISCOVER NETWORK

Please make checks payable to Quest Diagnostics.
Be sure to include invoice number on your check.

☐ Check here if address has changed.
Please provide your new address information on the back.
Quest Diagnostics reserves the right to assign this receivable to any of its affiliates.

Lab Code: NEV

Amount Due:	$787.11

Due Date: **UPON RECEIPT** **Invoice Number:** [redacted]6182

Patient Name: ABIGAIL WILLIAMS

Amount Enclosed:	$

If you received an explanation of benefits showing your responsibility is less than the amount shown on this bill, please pay the lesser amount. To fully resolve your invoice, please provide a copy of your explanation of benefits.

MAIL PAYMENTS ONLY TO:

QUEST DIAGNOSTICS
PO BOX 740351
CINCINNATI, OH 45274-0351

HGW 366

Quest Diagnostics™

Do not use address below:
P.O. Box 7308
Hollister, MO 65673-7308

AB 01 001482 91696 B 4 A

NEV 88840690 1003301 7160696201 7
HERMAN WILLIAMS
4018 ADABELLA AVE APT 204
LAS VEGAS, NV 89115-1613

Laboratory Invoice

For services not included in your physician's bill

Invoice Date:	Amount Due:	Due Date:
Dec. 28, 2019	$752.63	UPON RECEIPT

Invoice Number	Lab Code
[redacted]6201	NEV

Patient Name: HERMAN WILLIAMS
Responsible Party: HERMAN WILLIAMS
Date of Service: March 30, 2019
Requested By: JACKSON-CLARK,DAVITA

FOURTH NOTICE

FINAL PAST DUE NOTICE

This is the final notice you will receive from our office. Please make payment immediately to prevent your account from being forwarded to a collection agency for further collection action.

If further action is necessary, you may also be liable for additional expenses and costs, as permitted by law, which can substantially increase the amount you owe.

Please contact us today to make payment and prevent further collection efforts.

Patient Amount Due: $752.63
Tax ID # 88-0099333

To pay your invoice 24 hours / 7 days, visit our website at www.questdiagnostics.com/bill

For billing inquiries or to pay by phone: 1-855-619-4056
Please have your invoice available for reference.
MON-TH 8:30AM-5PM;FRI 9-4PM 08:30 AM - 05:00 PM PST
Se Habla Espanol!!

If you have Medicare, Railroad Medicare or Medicaid as your primary or secondary insurance, please send us the information - see reverse side.
The CPT codes provided are based on AMA guidelines and without regard to specific payor requirements.

Quest Diagnostics Incorporated and its subsidiaries (Quest) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

001482 1/1

▲ Please fold and tear along perforation and remit with payment in the envelope provided. ▲

Quest Diagnostics™

LOG ON NOW. Pay your bill online securely at
www.questdiagnostics.com/bill
or call 1-855-619-4056 .
Quest Diagnostics also accepts:

VISA MasterCard AMERICAN EXPRESS DISCOVER NETWORK

Please make checks payable to Quest Diagnostics.
Be sure to include invoice number on your check.

☐ Check here if address has changed.
Please provide your new address information on the back.
Quest Diagnostics reserves the right to assign this receivable to any of its affiliates.

Lab Code: NEV

Amount Due:	$752.63
Due Date: UPON RECEIPT	Invoice Number: 7160696201

Patient Name: HERMAN WILLIAMS

Amount Enclosed:	$

If you received an explanation of benefits showing your responsibility is less than the amount shown on this bill, please pay the lesser amount. To fully resolve your invoice, please provide a copy of your explanation of benefits.

MAIL PAYMENTS ONLY TO:

QUEST DIAGNOSTICS
PO BOX 740351
CINCINNATI, OH 45274-0351

HGW 367

AARGON(R)
COLLECTION AGENCY
THE ONLY REAL SOLUTION

To Contact Us: (800) 990-4765 EXT 333
Hours of Operation:
Monday – Friday | 8:00 a.m. – 6:00 p.m.
Saturday | 8:00 a.m. – 12:00 p.m.

AARGON ACCOUNT #: [redacted]3684
Letter Dated: October 15, 2020

DELINQUENT ACCOUNT	
Amount Owed:	$23,768.20
Interest Accrued:	$ 0.00
Your Payments:	- $ 0.00
Total Balance Due:	**$23,768.20**

Creditor's Name: University Medical Center Of Southern NV
Creditors Account Number: 1718000374

Dear HERMAN GEORGE WILLIAMS,

At this time your account has not been paid in full, nor have we received notice that you require payment arrangements.

Call Spencer Davis toll free at (800) 990-4765 ext. 333 to discuss your account and set up payment arrangements. Please reference Account Number: 3976-118684

Manage your Account Online. Visit us at http://payaargon.com
Your User Name is: WILLIAMS| Password is: 3976-118684

Mail a check or money order payable to Aargon Agency Inc., for the Total Balance Due using the remittance coupon below and enclosed envelope.

As of the date of this letter, you owe the Total Balance Due listed above. This amount may vary due to payments and/or accrual of interest. Because of interest that may vary from day to day the amount due on the day you pay may be greater. Hence, if you pay the amount shown above, an adjustment may be necessary after we receive your payment, in which event we will inform you before depositing your payment for collection. For further information you may contact our office at (800) 990-4765 ext 333.

Information regarding this account has been or may be reported to a credit reporting agency and may be reflected on your credit report.

This communication is from a debt collector. This is an attempt to collect a debt; any information obtained, will be used for that purpose.

Our Account Managers can find a plan that can work for you. Contact us t[illegible]ount. Payment options are available.

See Reverse Side for Important Consu
DETACH BOTTOM PORTION AND RETURN

Aargon Agency Inc.
8668 Spring Mountain Rd., Suite 110
Las Vegas, NV 89117-4113
RETURN SERVICE REQUESTED

3055 026154

HERMAN GEORGE WILLIAMS
5321 Chino Heights St
North Las Vegas NV 89081-2970

☐ Please check box if address is incorrect or information has changed, and ind

Account Summary	
Patient Name:	Herman Williams
Trip Number:	5511240701300
Balance:	$948.46

)ate: February 12, 2020

RESOLUTION NOTIFICATION

)ear Herman Williams:

'his notice is in reference to your unpaid balance for ambulance services provided by American Medical Response. This amount emains past due. In an effort to resolve this matter, we have directed the previously assigned collection agency to cease their ollection communications and reach out to you ourselves to resolve the unpaid balance.

t this time, we can accept payment in the amount of $426.81 as final resolution of this matter. This is a savings to you of 521.65. We are not obligated to renew this offer in the future.

' you wish to take advantage of this resolution offer, remit your check, money order, or cashier's check to:

\merican Medical Response
'O Box 1517
Southgate, MI 48195-0517

'lease include your trip number with your payment.

'ou may also make payment by contacting our office by phone at 844-362-3133. Our office hours are Monday to Friday 11:00 AM EST to 07:30 PM EST.

'our prompt attention is appreciated to resolve this issue.

Sincerely,
American Medical Response

This is an attempt to collect a debt and any information obtained will be used for that purpose.

VSIF-FP

PO Box 1517
Southgate, MI 48195-0517

IF PAYING BY CREDIT CARD, FILL OUT BELOW.	
VISA ☐ VISA ☐ MasterCard	
Card Number	
Signature	Exp Date
Creditor American Medical Response	Amount Paid $
Balance $948.46	Trip Number 5511240701300

Remit Payment To:

Herman Williams
4018 Adabella Ave Apt 204
Las Vegas, NV 89115-16

American Medical Response
PO Box 1517
gate, MI 48195-0517

ED EXHIBIT

DEFENDANT'S EXHIBIT
SS 2/11/21
A58691 6291

PENGAD 800-631-6989

HGW 369 ..

Midland Credit Management
350 Camino De La Reina
Suite100
San Diego, CA 92108

Phone	(877) 231-8885
Hours of Operation	Mon-Fri: 5am-4:30pm PT;
Original Creditor	Credit One Bank, N.A.
Original Account Number	[redacted]0174
MCM Account Number	8574412086
Current Owner	Midland Funding LLC
Current Balance	$729.00

P6T63 005

Herman Williams
4018 Adabella Ave Apt 204
Las Vegas, NV 89115-1613

06-10-2020

RE: Credit One Bank, N.A.

Dear Herman,

We have received and processed your dispute. After reviewing the information you provided, our account notes, and information provided by the previous creditor we have found that our information is correct. We have also enclosed documents regarding the account. If you believe we have reached this conclusion in error, please reference the information below:

You have indicated that the following item(s) pertain to your account:	In order for us to further investigate your inquiry please provide the following documentation:
We are uncertain of what you are specifically disputing	Written explanation and documentation demonstrating any errors in our account information

Information can be mailed to: Attention: Consumer Support Services, 320 E Big Beaver Rd. Suite 300, Troy, MI 48083

In response to your dispute, we have requested that the three major credit bureaus change the status of this account to "Disputed". Your credit report will not be updated if the federal reporting period has expired.

For additional information on credit reporting and tradeline statuses, please visit the following website:
https://www.MidlandCredit.com/help-center/assistance-faqs/

Please call Consumer Support Services at (877) 231-8885 if you have any additional questions.

Sincerely,

Tim Bolin

Tim Bolin, Division Manager

The law limits how long you can be sued on a debt. Because of the age of your debt, we will not sue you for it. If you do not pay the debt, we may continue to report it to the credit reporting agencies as unpaid.

PENGAD 800-631-6989 DEFENDANT'S EXHIBIT D586291 ED EXHIBIT

HGW 370

CREDIT ONE BANK CREDIT CARD STATEMENT
Account Number 4447 9622 9367 0174
September 25, 2016 to October 24, 2016

SUMMARY OF ACCOUNT ACTIVITY		
Previous Balance		$720.75
Payments	-	$0.00
Other Credits	-	$0.00
Purchases	+	$0.00
Cash Advances	+	$0.00
Fees Charged	+	**$8.25**
Interest Charged	+	**$0.00**
New Balance		$729.00
Credit Limit		$400.00
Available Credit		$0.00
Statement Closing Date		10/24/16
Days in Billing Cycle		30

QUESTIONS?
Call Customer Service or Report
a Lost or Stolen Credit Card 1-877-825-3242
Outside the U.S. Call 1-702-405-2042

Please send billing inquiries and correspondence to:
P.O. Box 98873, Las Vegas, NV 89193-8873

PAYMENT INFORMATION	
New Balance	$729.00
Past Due Amount	$720.75
Amount Due This Period	$8.25
Minimum Payment Due	**$729.00**
Payment Due Date	**11/20/16**

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 $35.

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 the statement in about...	And you will end up paying an estimated total of...
Only the minimum payment	1 months	$729.00

If you would like a location for credit counseling services, call 1-866-515-5720.

TRANSACTIONS

Reference Number	Trans Date	Post Date	Description of Transaction or Credit	Amount
			Fees	
F572700MU000CYLAC	10/24	10/24	ANNUAL FEE 11/16 THROUGH 11/16	8.25
			TOTAL FEES FOR THIS PERIOD	**8.25**
			Interest Charged	
	10/24	10/24	Interest Charge on Purchases	0.00
	10/24	10/24	Interest Charge on Cash Advances	0.00
			TOTAL INTEREST FOR THIS PERIOD	**0.00**

2016 Totals Year-to-Date	
Total fees charged in 2016	$286.45
Total interest charged in 2016	$84.70

Your account is currently closed.

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	24.15%(v)	$0.00	$0.00
Cash Advances	24.15%(v)	$0.00	$0.00

(v) = Variable Rate

DEFENDANT'S EXHIBIT
U
PENGAD 800-631-6989

5385 JBH 001 7 24 161024 0 C X PAGE 1 of 3 2 0 5727 9620 M149 O1EO5385

Please return this portion with your payment, and write your account number on your check, made payable to *CREDIT ONE BANK.*

HGW 371

Flowsheet Print Request

Patient: WILLIAMS, ELISHA
MRN: 0001708199(EM)

Date Range: 02/27/2020 21:26 PST - 03/03/2020 21:26 PST

Printed by: Taylor, Shook-Ming DO
Printed on: 03/02/2020 21:35 PST

Laboratory	03/02/2020 21:18 PST
Serology/Immunology	
Influenza A	Positive (A)
Influenza B	Negative
FluA/B Source	Swab

ED EXHIBIT

D58629 6297

HGW 373

Result type:	XR Chest 1 View
Result Date:	March 02, 2020 21:10 PST
Result status:	Auth (Verified)
Result Title:	XR Chest 1 View
Source of Report:	Sanders, Michael MD on March 02, 2020 21:13 PST
Verified By:	Sanders, Michael MD on March 02, 2020 21:13 PST
Encounter info:	1458193, NVCR, Emergency, 03/02/2020 -

* Final Report *

Reason For Exam
cough, fever,Other - please free text reason for exam

Radiology Report
REASON FOR EXAM: Cough, fever

COMPARISON: None.

FINDINGS: Single AP view of the chest was obtained. There are moderately prominent perihilar lung markings bilaterally. There is no focal consolidation.. There is no large pleural effusion. Heart size is normal. There is no pulmonary vascular congestion. There is no pneumothorax.

IMPRESSION: Moderately prominent perihilar lung markings bilaterally. This can be seen with atypical/viral infection.

ELECTRONICALLY SIGNED BY: Michael Sanders, M.D.;3/2/2020 9:13 PM

Signature Line

* * * F I N A L * * *

Dictated by: Sanders, Michael MD, Physician
Electronically signed by: Sanders, Michael MD
Transcribed by:IR , D: 03/02/2020 21:13, T: 03/02/2020 21:16, S: 03/02/2020 21:13

* * * F I N A L * * *

Completed Action List:
* Order by Taylor, Shook-Ming DO on March 02, 2020 21:01 PST

XR Chest 1 View
* Final Report *

WILLIAMS, ELISHA - 0001708199(EM)

* Perform by Jones, Donnita on March 02, 2020 21:10 PST
* VERIFY by Sanders, Michael MD on March 02, 2020 21:13 PST

SAFE PAIN MEDICINE PRESCRIBING

We care about you. Our goal is to treat your medical conditions, including pain, effectively, safely and in the right way.

Pain relief treatment can be complicated. Mistakes or abuse of pain medicine can cause serious health problems and death.

Our emergency department will only provide pain relief options that are safe and correct.

For your SAFETY, we routinely follow these rules when helping you with your pain.

1. We look for and treat emergencies. We use our best judgement when treating pain. These recommendations follow legal and ethical advice.
2. You should have only ONE provider and ONE pharmacy helping you with pain. We do not usually prescribe pain medication if you already receive pain medicine from another health care provider.
3. If pain prescriptions are needed for pain, we will only give you a limited amount.
4. We do not refill stolen or lost prescriptions for pain medication.
5. We do not prescribe long-acting pain medicines such as: OxyContin, MSContin, Fentanyl (Duragesic), Methadone, Opana ER, Exalgo, and others.
6. We do not provide missed doses of Methadone.
7. We do not usually give shots for flare-ups of chronic pain.
8. Health care laws, including HIPAA, allow us to ask for all of your medical records. These laws allow us to share information with other health providers who are treating you.
9. We may ask you to show a photo ID when you receive a prescription for pain medicines.
10. In California, we use the California Prescription Drug Monitoring Program called CURES. In Arizona and Nevada, we use the Prescription Monitoring Program that has oversight by the Arizona and Nevada state boards of pharmacy. These statewide computer systems track opioid pain medications and other controlled substance prescriptions.

If you need help with substance abuse or addiction, please call **1-800-662-HELP (4357)** for confidential referral and treatment.

Sponsored by:

American College of Emergency Physicians
ADVANCING EMERGENCY CARE

CMA
California Medical Association

AZHHA
Arizona Hospital and Healthcare Association

NHA
Nevada Hospital Association

ENA
Emergency Nurses Association
Safe Practice, Safe Care
California State Council

KAISER PERMANENTE

Dignity Health Emerus - Craig Ranch
1550 W. Craig Rd
North Las Vegas, NV 89032
(702) 777-3615

Emergency Department

Patient Discharge Instructions

If your symptoms continue or worsen, return to the emergency department or contact your physician.

If you have questions about your discharge instructions, call the phone number above.

Name: WILLIAMS, ELISHA

Current Date: 03/02/20 21:42:57

DOB: 04/26/2013 **MRN:** 0001708199(EM) **FIN:** 1458193

Patient Address: 4018 ADABELLA AVE APT 204 LAS VEGAS NV 89115

Patient Phone: (203) 864-1977

Reason for Visit:
Fever

Providers:

Provider	Role
Taylor, Shook-Ming DO	ED Provider

Discharge Diagnosis: Acute febrile illness in pediatric patient; Influenza A

Dignity Health Emerus - Craig Ranch would like to thank you for allowing us to assist with your healthcare needs.

These instructions are intended to provide general information and guidelines to follow at home to properly care for your particular medical problem.

The following diagnostic tests and/or procedures were performed during your stay:

Laboratory
Influenza A & B

Radiology
XR Chest 1 View

WILLIAMS, ELISHA has been given the following list of follow-up instructions, prescriptions, patient education materials and valuables/belongings:

Follow-up Instructions:

With:	Address:	When:
Follow up with primary care provider		Within 1 to 3 days

With:	Address:	When:

Return to the ED for any new

or concerning symptoms
Comments:
Such as difficulty breathing, difficulty keeping down fluids, a stiff neck, or any other concerns

All referrals for follow up medical care may require approval by your insurance carrier. Any provider contact information (above) is provided to assist you in getting the follow up we recommend. However, it's important that you first check with your insurance provider to assure that the provider is in your network and such a visit will be covered. Some plans may require a Primary Care doctor to provide a referral for specialist appointments.

No Prescheduled Appointments Found

Immunizations
No Immunizations Documented This Visit

Patient Education Materials:

Influenza, Pediatric

Influenza, more commonly known as "the flu," is a viral infection that mainly affects the respiratory tract. The respiratory tract includes organs that help your child breathe, such as the lungs, nose, and throat. The flu causes many symptoms similar to the common cold along with high fever and body aches.

The flu spreads easily from person to person (is contagious). Having your child get a flu shot (influenza vaccination) every year is the best way to prevent the flu.

What are the causes?

This condition is caused by the influenza virus. Your child can get the virus by:

- Breathing in droplets that are in the air from an infected person's cough or sneeze.

- Touching something that has been exposed to the virus (has been contaminated) and then touching the mouth, nose, or eyes.

What increases the risk?

Your child is more likely to develop this condition if he or she:

- Does not wash or sanitize his or her hands often.
- Has close contact with many people during cold and flu season.
- Touches the mouth, eyes, or nose without first washing or sanitizing his or her hands.
- Does not get a yearly (annual) flu shot.

Your child may have a higher risk for the flu, including serious problems such as a severe lung infection (pneumonia), if he or she:

- Has a weakened disease-fighting system (immune system). Your child may have a weakened immune system if he or she:
  - Has HIV or AIDS.
  - Is undergoing chemotherapy.
  - Is taking medicines that reduce (suppress) the activity of the immune system.
- Has any long-term (chronic) illness, such as:
  - A liver or kidney disorder.
  - Diabetes.
  - Anemia.
  - Asthma.
- Is severely overweight (morbidly obese).

What are the signs or symptoms?

Symptoms may vary depending on your child's age. They usually begin suddenly and last 4–14 days. Symptoms may include:

- Fever and chills.
- Headaches, body aches, or muscle aches.
- Sore throat.
- Cough.
- Runny or stuffy (congested) nose.
- Chest discomfort.
- Poor appetite.
- Weakness or fatigue.
- Dizziness.
- Nausea or vomiting.

How is this diagnosed?

This condition may be diagnosed based on:

- Your child's symptoms and medical history.

- A physical exam.
- Swabbing your child's nose or throat and testing the fluid for the influenza virus.

How is this treated?

If the flu is diagnosed early, your child can be treated with medicine that can help reduce how severe the illness is and how long it lasts (antiviral medicine). This may be given by mouth (orally) or through an IV.

In many cases, the flu goes away on its own. If your child has severe symptoms or complications, he or she may be treated in a hospital.

Follow these instructions at home:

Medicines

- Give your child over-the-counter and prescription medicines only as told by your child's health care provider.
- **Do not** give your child aspirin because of the association with Reye's syndrome.

Eating and drinking

- Make sure that your child drinks enough fluid to keep his or her urine pale yellow.
- Give your child an oral rehydration solution (ORS), if directed. This is a drink that is sold at pharmacies and retail stores.
- Encourage your child to drink clear fluids, such as water, low-calorie ice pops, and diluted fruit juice. Have your child drink slowly and in small amounts. Gradually increase the amount.
- Continue to breastfeed or bottle-feed your young child. Do this in small amounts and frequently. Gradually increase the amount. **Do not** give extra water to your infant.
- Encourage your child to eat soft foods in small amounts every 3–4 hours, if your child is eating solid food. Continue your child's regular diet, but avoid spicy or fatty foods.
- Avoid giving your child fluids that contain a lot of sugar or caffeine, such as sports drinks and soda.

Activity

- Have your child rest as needed and get plenty of sleep.
- Keep your child home from work, school, or daycare as told by your child's health care provider. Unless your child is visiting a health care provider, keep your child home until his or her fever has been gone for 24 hours without the use of medicine.

General instructions

- Have your child:
  - Cover his or her mouth and nose when coughing or sneezing.
  - Wash his or her hands with soap and water often, especially after coughing or sneezing. If soap and water are not available, have your child use alcohol-based hand sanitizer.
- Use a cool mist humidifier to add humidity to the air in your child's room. This can make it easier for your child to breathe.
- If your child is young and cannot blow his or her nose effectively, use a bulb syringe to suction mucus out of the nose as told by your child's health care provider.
- Keep all follow-up visits as told by your child's health care provider. This is important.

How is this prevented?

- Have your child get an annual flu shot. This is recommended for every child who is 6 months or older. Ask your child's health care provider when your child should get a flu shot.
- Have your child avoid contact with people who are sick during cold and flu season. This is generally fall and winter.

Contact a health care provider if your child:

- Develops new symptoms.
- Produces more mucus.
- Has any of the following:
  - Ear pain.
  - Chest pain.
  - Diarrhea.
  - A fever.
  - A cough that gets worse.
  - Nausea.
  - Vomiting.

Get help right away if your child:

- Develops difficulty breathing.
- Starts to breathe quickly.
- Has blue or purple skin or nails.
- Is not drinking enough fluids.
- Will not wake up from sleep or interact with you.
- Gets a sudden headache.
- Cannot eat or drink without vomiting.
- Has severe pain or stiffness in the neck.
- Is younger than 3 months and has a temperature of 100.4°F (38°C) or higher.

Summary

- Influenza, known as "the flu," is a viral infection that mainly affects the respiratory tract.
- Symptoms of the flu typically last 4–14 days.
- Keep your child home from work, school, or daycare as told by your child's health care provider.
- Have your child get an annual flu shot. This is the best way to prevent the flu.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Released: 12/18/2006 Document Revised: 06/05/2019 Document Reviewed: 06/05/2019

Fever, Pediatric

A fever is an increase in the body's temperature. It is usually defined as a temperature of 100.4°F (38°C) or higher. In children older than 3 months, a brief mild or moderate fever generally has no long-term effect, and it usually does not need treatment. In children younger than 3 months, a fever may indicate a serious problem. A high fever in babies and toddlers can sometimes trigger a seizure (febrile seizure). The sweating that may occur with repeated or prolonged fever may also cause a loss of fluid in the body (dehydration).

Fever is confirmed by taking a temperature with a thermometer. A measured temperature can vary with:

- Age.
- Time of day.
- Where in the body you take the temperature. Readings may vary if you place the thermometer:
  - In the mouth (oral).
  - In the rectum (rectal). This is the most accurate.
  - In the ear (tympanic).
  - Under the arm (axillary).
  - On the forehead (temporal).

Follow these instructions at home:

Medicines

- Give over-the-counter and prescription medicines only as told by your child's health care provider. Carefully follow dosing instructions from your child's health care provider.
- **Do not** give your child aspirin because of the association with Reye's syndrome.
- If your child was prescribed an antibiotic medicine, give it only as told by your child's health care provider. **Do not** stop giving your child the antibiotic even if he or she starts to feel better.

If your child has a seizure:

- Keep your child safe, but **do not** restrain your child during a seizure.
- To help prevent your child from choking, place your child on his or her side or stomach.
- If able, gently remove any objects from your child's mouth. **Do not** place anything in his or her mouth during a seizure.

General instructions

- Watch your child's condition for any changes. Let your child's health care provider know about them.
- Have your child rest as needed.
- Have your child drink enough fluid to keep his or her urine pale yellow. This helps to prevent dehydration.
- Sponge or bathe your child with room-temperature water to help reduce body temperature as needed. **Do not** use cold water, and **do not** do this if it makes your child more fussy or uncomfortable.
- **Do not** cover your child in too many blankets or heavy clothes.
- If your child's fever is caused by an infection that spreads from person to person (is contagious), such as a cold or the flu, he or she should stay home. He or she may leave the house only to get medical care if needed. The child should not return to school or daycare until at least 24 hours after the fever is gone. The fever should be gone without the use of medicines.
- Keep all follow-up visits as told by your child's health care provider. This is important.

Contact a health care provider if your child:

- Vomits.
- Has diarrhea.
- Has pain when he or she urinates.
- Has symptoms that do not improve with treatment.

- Develops new symptoms.

Get help right away if your child:

- Who is younger than 3 months has a temperature of 100.4°F (38°C) or higher.
- Becomes limp or floppy.
- Has wheezing or shortness of breath.
- Has a febrile seizure.
- Is dizzy or faints.
- Will not drink.
- Develops any of the following:
  - A rash, a stiff neck, or a severe headache.
  - Severe pain in the abdomen.
  - Persistent or severe vomiting or diarrhea.
  - A severe or productive cough.
- Is one year old or younger, and you notice signs of dehydration. These may include:
  - A sunken soft spot (fontanel) on his or her head.
  - No wet diapers in 6 hours.
  - Increased fussiness.
- Is one year old or older, and you notice signs of dehydration. These may include:
  - No urine in 8–12 hours.
  - Cracked lips.
  - Not making tears while crying.
  - Dry mouth.
  - Sunken eyes.
  - Sleepiness.
  - Weakness.

Summary

- A fever is an increase in the body's temperature. It is usually defined as a temperature of 100.4°F (38°C) or higher.
- In children younger than 3 months, a fever may indicate a serious problem. A high fever in babies and toddlers can sometimes trigger a seizure (febrile seizure). The sweating that may occur with repeated or prolonged fever may also cause dehydration.
- **Do not** give your child aspirin because of the association with Reye's syndrome.
- Pay attention to any changes in your child's symptoms. If symptoms worsen or your child has new symptoms, contact your child's health care provider.
- Get help right away if your child who is younger than 3 months has a temperature of 100.4°F (38°C) or higher, your child has a seizure, or your child has signs of dehydration.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Released: 05/08/2008 Document Revised: 06/05/2019 Document Reviewed: 06/05/2019

Medication Information:

Please advise your Primary Care Physician of these new medications and update your list as your medications change. Be sure to carry your complete medication list with you at all times.

New Meds

Printed or Written Prescriptions

acetaminophen (Tylenol Childrens 160 mg/5 mL oral suspension)
11.5 Milliliter By mouth every 4 hours as needed Pain/Temperature. not to exceed 5 doses/day. Refills: 0.,
Target Dose: Tylenol Childrens 160 mg/5 mL oral suspension 15 mg/kg 03/02/20 21:17:58
Last Dose Given:_____Next Dose Due:_____

ibuprofen (ibuprofen 100 mg/5 mL oral suspension)
12.5 Milliliter By mouth every 6 hours as needed Pain/Temperature. with food or milk
not to exceed 4 doses/day. Refills: 0.,
Target Dose: ibuprofen 100 mg/5 mL oral suspension 10 mg/kg 03/02/20 21:18:29
Last Dose Given:_____Next Dose Due:_____

oseltamivir (Tamiflu 6 mg/mL oral suspension) 10 Milliliter By mouth twice daily for 5 Days. Refills: 0.
Last Dose Given:_____Next Dose Due:_____

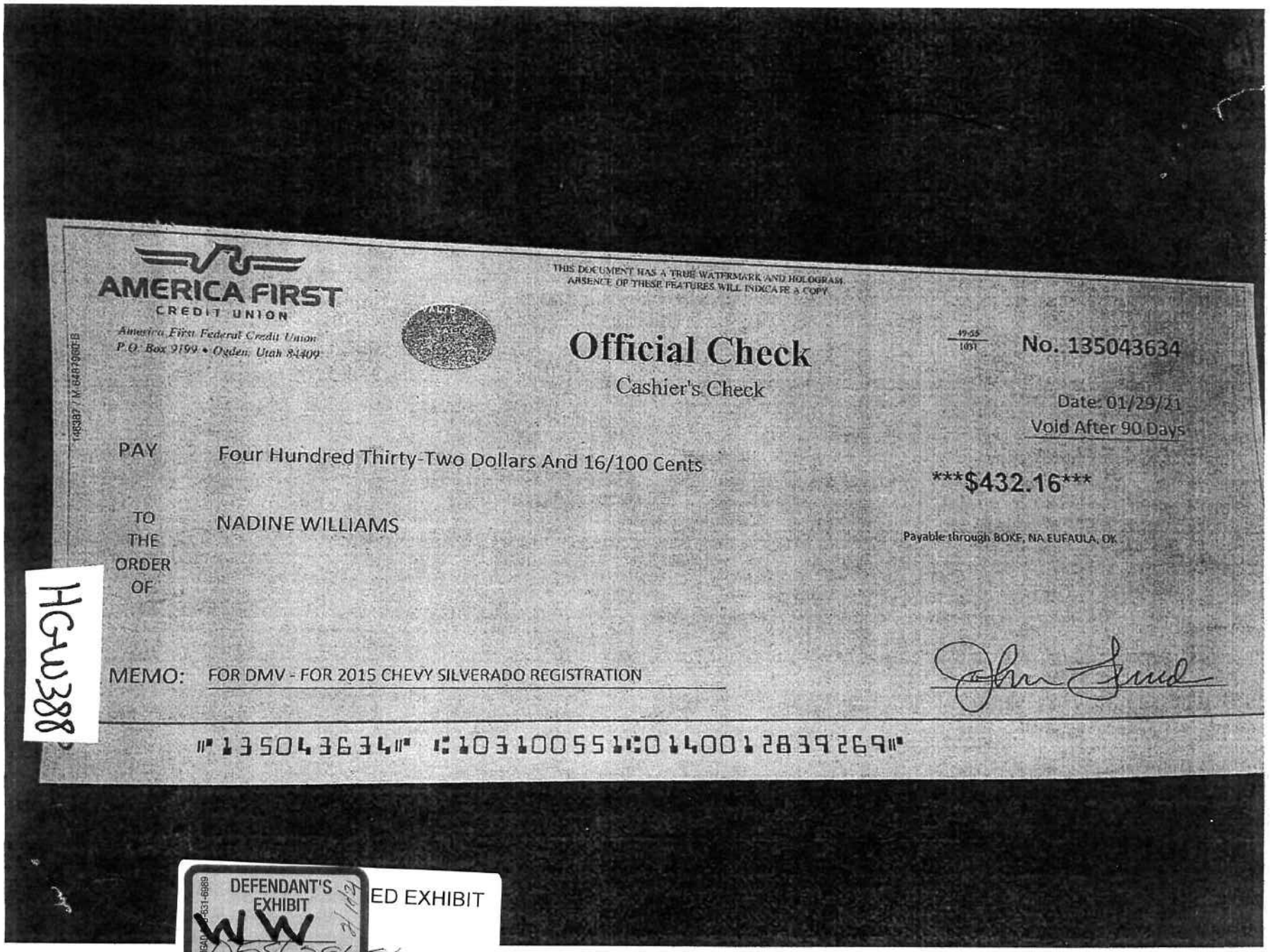
Home Meds (Changed or Renewed)

Printed or Written Prescriptions

Start Taking **ondansetron (Zofran ODT 4 mg oral tablet, disintegrating)**
1 tab(s) By mouth every 8 hours as needed as needed for nausea/vomiting. allow tablet to dissolve on tong ue. Refills: 0.
Last Dose Given:_____Next Dose Due:_____

Other Medications

Start Taking **ondansetron (Zofran 4 mg/5 mL oral soln)** 2.5 Milliliter By mouth every 8 hours. Refills: 0.
Last Dose Given:_____Next Dose Due:_____



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America First Federal Credit Union
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THIS DOCUMENT HAS A TRUE WATERMARK AND HOLOGRAM.
ABSENCE OF THESE FEATURES WILL INDICATE A COPY.

Official Check
Cashier's Check

49-55/1091

No. 135043634

Date: 01/29/21
Void After 90 Days

PAY Four Hundred Thirty-Two Dollars And 16/100 Cents ***$432.16***

TO THE ORDER OF NADINE WILLIAMS

Payable through BOKF, NA EUFAULA, OK

MEMO: FOR DMV - FOR 2015 CHEVY SILVERADO REGISTRATION

⑈135043634⑈ ⑆103100551⑆014001283926 9⑈

HGW388

DEFENDANT'S EXHIBIT
WW
D58691

ED EXHIBIT

58691

6900 WESTCLIFF DR. #500
LAS VEGAS, NEVADA 89146

HGw389

RECEIPT DATE 01/29/21 No. 417084

RECEIVED FROM Herman Williams $432.16

Four Hundred and thirty two and sixteen CENTS

FOR RENT Nadine Williams

FOR _____

ACCOUNT	
PAYMENT	
BAL. DUE	

☐ CASH
☒ CHECK
☐ MONEY ORDER
☐ CREDIT CARD

FROM _____ TO _____

BY _____

REQ
Kenneth M. Robbins, Esq.
Nevada Bar No. 13572
732 South 6th Street, Suite #100
Las Vegas, NV 89101
(702) 400-0000 Telephone
(702) 425-1156 Facsimile
FamilyFirst@HalfPriceLawyers.com
"Unbundled" Attorney for Defendant

DISTRICT COURT
FAMILY DIVISION
CLARK COUNTY, NEVADA

NADINE WILLIAMS, Plaintiff vs. HERMAN GEORGE WILLIAMS, Defendant.	Case No.: D-19 586291-D Dept.: I

REQUEST FOR ADMISSIONS

Defendant, Herman George Williams, hereby propounds the following Request for Admissions upon Plaintiff, Nadine Williams, pursuant to NRCP 36, which must be answered by said Plaintiff under oath within 30 days of service herewith:

GENERAL INSTRUCTIONS

Pursuant to Rule 36, N.R.C.P., any matter is deemed admitted unless a written answer or objection addressed to the matters signed by you is filed within 30 days after service of this request. The reasons for any objections should be stated. The answer should specifically deny any request not specifically admitted or should set forth in detail the reason why the answering party cannot truthfully admit or deny a particular request.

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HGW 390

A denial shall thoroughly meet the substance of the request for admissions, and when good faith requires that Plaintiff qualify her answer or deny only a part of the matter of which an admission is requested, Plaintiff shall specify so much of it as is true and qualify or deny the remainder. Plaintiff should not give lack of information or knowledge as a reason for failure to admit or deny unless Plaintiff can state that a reasonable inquiry has been made and that the information known or readily available and obtainable to the Plaintiff is insufficient to enable to admit or deny.

REQUEST FOR ADMISSION NUMBER 1:

Admit that have hit your minor daughter in the head with a pipe.

REQUEST FOR ADMISSION NUMBER 2:

Admit that you have pulled your minor daughter's hair while trying to get her to her bedroom.

REQUEST FOR ADMISSION NUMBER 3:

Admit that you served an Eviction Notice to your mother.

REQUEST FOR ADMISSION NUMBER 4:

Admit that you cancelled the auto insurance on the Defendant's truck.

REQUEST FOR ADMISSION NUMBER 5:

Admit that you cancelled the registration on the Defendant's truck.

REQUEST FOR ADMISSION NUMBER 6:

Admit that you moved your boyfriend in the home, shortly after you kicked the Defendant out.

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REQUEST FOR ADMISSION NUMBER 7:

Admit that you have added your boyfriend to you auto insurance plan.

REQUEST FOR ADMISSION NUMBER 8:

Admit that you have had the minor child, Abigail, in your care since October 25, 2019, in violation of the current court order.

REQUEST FOR ADMISSION NUMBER 9:

Admit that you hit the minor children (boys) with objects, causing injuries to them.

REQUEST FOR ADMISSION NUMBER 10:

Admit that the minor child, Abigail, has been late to school while in your care.

REQUEST FOR ADMISSION NUMBER 11:

Admit that the minor child, Abigail, has been on detention at school while in your care.

REQUEST FOR ADMISSION NUMBER 12:

Admit the you purchase things for the minor child (daughter) but not for the boys.

Dated this 6 day of December, 2019.

Kenneth M. Robbins, Esq.
Nevada Bar No.: 13572
"Unbundled" Attorney for Defendant

INTG
Kenneth M. Robbins, Esq.
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DISTRICT COURT
FAMILY DIVISION
CLARK COUNTY, NEVADA

NADINE WILLIAMS, Plaintiff vs. HERMAN GEORGE WILLIAMS, Defendant.	Case No.: D-19-586291-D Dept.: I **DEFENDANT'S FIRST SET OF INTERROGATORIES TO PLAINTIFF**

COMES NOW, Defendant, Herman George Williams by and through his attorney, Kenneth M. Robbins, Esq., appearing in an unbundled capacity and hereby requests the Plaintiff, Nadine Williams, answer, in writing and under oath, within thirty (30) days of receipt, the Interrogatories set forth below:

PRELIMINARY STATEMENT

INSTRUCTIONS

1. Each Interrogatory should be construed independently. No Interrogatory should be construed by reference to any other Interrogatory if the result is a limitation of the scope of the response to such Interrogatory.
2. Where Interrogatory calls for a response in more than one part, each part should be separate so that the response is clearly understandable.

3. If you cannot respond to any of the following Interrogatories in full and complete detail, after exercising due diligence to secure the information to do so, please so state and respond to the extent possible, specifying your inability to respond to the remainder and stating whatever information or knowledge you have concerning the remaining portion and the facts upon which you base your response.

4. If you object to an Interrogatory in whole or in part, of if the documentation regarding the response to an Interrogatory is withheld on the grounds of privilege or otherwise, please set forth fully every objection, describing generally the document withheld and set forth in detail the exact ground upon which you rely with such specificity as will permit the court to determine the legal sufficiency of your objection or position upon a motion to compel.

5. The singular form of a word shall be interpreted as plural and the plural form of a word shall be interpreted as singular, whenever appropriate, to bring within the scope of these Interrogatories any information or documents which might otherwise be beyond their scope.

6. In responding to these Interrogatories, you are to furnish all information available to you at the time your responses are made, including information in the possession of your attorney's, officers, directors, employees, accountants, as well as any other agent of any sort, whether present or past.

7. These Interrogatories shall be deemed continuing in nature to as to require supplemental responses to each of these Interrogatories with any further information you or your attorneys obtain between the time your initial responses hereto are served and the time of the trial.

GENERAL INTERROGATORIES

INTERROGATORY NO. 1:

State your full legal name, residential address, any names by which you have been known, including but not limited to nicknames, telephone numbers at home, work, cellular and any other numbers available to you, date of birth, social security number, occupation and the names of all persons helping you to answer these interrogatories.

INTERROGATORY NO.2:

Identify yourself and all individuals with whom you reside. For each individual other than yourself, state that individual's age, relationship to you and marital status. State your own birth date and social security number.

INTERROGATORY NO. 3:

State all residences you have lived at, including the street address, city, state and zip code since January 1, 2018.

INTERROGATORY NO. 4:

Describe your education background. Include in your answer the highest grade you completed, the name and date of any degree, diploma or certificate you received and the name of the institution conferring the degree, diploma or certificate you received, the name of the institution conferring the degree, diploma or certificate and any specialized training you have received.

INTERROGATORY NO. 5:

Describe each position of employment held by you since January 1, 2016 through the present and include the name and address of your employer, the dates of

your employment, your official title, if any a description of the compensation that you received including bonuses and any benefit provided by the employment.

INTERROGATORY NO. 6:

State your work schedule from January 1, 2016 through the present date.

INTERROGATORY NO. 7:

If you are unemployed, describe your efforts to obtain employment since you became unemployed, identify each prospective employer and employment agency you have contacted while seeking employment and state the date of each contact.

INTERROGATORY NO. 8:

Please list each and every banking institution in which you currently have an account either individually or held jointly with some else (checking account, savings account, IRA, 401 (k), money market or any other account) include the following:

a. Nature of the account;

b. Account number; and

c. Balance of the account;

INTERROGATORY NO. 9:

Please identify and describe (including name of financial institution and account number) of any and all credit cards held in your name individually or jointly with another that you have made payments on from January 1, 2016 to the present, when the account was opened and the balance of said account.

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INTERROGATORY NO. 10:

Identify the sources and amounts of all taxable and non-taxable income you received during the past three years.

INTERROGATORY NO. 11:

Please identify and describe (including name of financial institution, account number and current balance) any and all pensions or retirement accounts currently in your name.

INTERROGATORY NO. 12:

Please describe your medical history for the last five (5) years. Such description should include but not limited to the names, addresses and phone numbers of all medical providers, including but not limited to all psychological and psychiatric providers with which you have treated the reason for treatment, the outcome and the date(s) of such treatment. The term medical provider includes all therapists and counselors.

INTERROGATORY NO. 13:

Please state what you consider to be the best custodial arrangement for the minor children and detail the reasons why you believe so.

INTERROGATORY NO. 14:

Please state whether you and the Defendant have any major disagreements regarding the children's education, religious upbringing, discipline, health care needs and/or extracurricular activities and if so, detail the nature of each such agreement and

each party's position as you perceive it.

INTERROGATORY NO. 15

Please list the name, address, telephone number and dates of contact for each physician/dentist to whom you have personally taken the minor children for treatment.

INTERROGATORY NO. 16

Do you believe there is anything about Defendant that renders him unfit to have primary physical custody of the minor children? If so, describe with specificity such unfitness.

INTERROGATORY NO. 17

Do you believe there is anything about Defendant that renders him unfit to have joint legal custody of the minor children? If so, describe with specificity such unfitness.

INTERROGATORY NO. 18

Please state with specificity your greatest strengths and weaknesses as a parent.

INTERROGATORY NO. 19:

Please state with specificity Defendant's greatest strengths and weaknesses as a parent.

INTERROGATORY NO. 20

Please describe in detail the facts which support your belief that it would be in the minor child's best interest for you to have primary physical custody and how you believe this will benefit the minor children.

INTERROGATORY NO. 21

Please identify and fully describe any efforts, financial or otherwise in which you have provided support for the minor children. Your response should include but not limited to, child support payments, health insurance payments, transportation, gifts, clothing, toys and medical reimbursement.

INTERROGATORY NO. 22

Please identify and full describe any and all incidents of violence that have occurred involving either you, a family member or friend while the minor children were in your care. Your response must include, but not be limited to all instances in which the child was present when a verbal altercation or act of violence occurred during your custodial time.

INTERROGATORY NO. 23:

Please state whether you have ever been arrested (as an adult or juvenile) and if so, please state with specificity the following:

a. The reasons and events that lead to the arrest;

b. The state, city and local authorities that conducted the arrest;

c. The final charges and/or convictions that resulted for the apprehensions.

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INTERROGATORY NO. 24:

Please state the amount of alcoholic beverage (including beer) and/or illegal/prescription drugs and marijuana and cocaine that you consume on a daily or weekly basis and whether or not you have received any treatment for alcohol/drug related concerns or addictions.

INTERROGATORY NO. 25:

Please list any and all witnesses you plan to call to testify at the evidentiary hearing.

Dated this 6 day of December 2019.

Kenneth M. Robbins, Esq.
Nevada Bar No.: 13572
"Unbundled" Attorney for Defendant

DAO

DISTRICT COURT

CLARK COUNTY, NEVADA

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NADINE ALECIA WILLIAMS, Plaintiff, vs. HERMAN GEORGE WILLIAMS, Defendant.	CASE NO.: D-19-586291-D DEPT: I DATE OF HEARING: 02/11/2021 TIME OF HEARING: 9:00 A.M.

DECISION AND ORDER

THIS MATTER came before the Court for Non-Jury Trial on February 11, 2021. Plaintiff, Nadine Alecia Williams ("Nadine"), appeared with her attorney, Frank Toti, Esq., over the *Blue Jeans* video application and Defendant, Herman George Williams ("Herman"), appeared with his unbundled attorney, Kenneth Robbins, Esq., over the *Blue Jeans* video application. The Court heard the testimony from the parties. The Court, after a review of the pleadings and papers on file herein, considering and weighing the credibility of the parties, and good cause appearing issues the following *Findings of Fact, Conclusions of Law, and Orders:*

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

SUMMARY OF TESTIMONY

1. Nadine lives at 284 Harper Ferry Avenue in Las Vegas, Nevada. She has been a resident of Nevada for more than six (6) weeks prior to filing this action. She intends to remain in Nevada. She is not pregnant.

2. The parties were married March 2, 2004 in New York. Nadine testified that their interests are no longer compatible and they are not likely to reconcile. She requests her former name be restored to Nadine Gayle. She relocated to Clark County in September of 2015 with the Elisha and her mother. Herman brought the three older children three weeks later. Herman was absent from Clark County at various times until November 2018.

3. The parties have four (4) children (collectively referenced as "minor children"):

Abigail Williams (16) born on October 27, 2004.

Herman Williams III (12) born on August 24, 2008.

Matthew Williams (11) born on May 13, 2010

Elisha Williams (7) born on April 26, 2013.

4. Herman also has an adult daughter from a different relationship.

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DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

5. Abigail currently attends Nevada State High School. Nadine enrolled Abigail for the current school year without consulting with Herman. Nadine stated that Herman is listed as a parent and can obtain information from the school.

6. Elisha and Matthew attend Gwendolyn Elementary School and Herman II attends Cram. Nadine would like the boys to attend Doral Academy for the 2021-2022 school year. There is a location approximately ten miles from him and fifteen miles from her. Herman does not oppose the boys attending Doral Academy.

7. Herman runs his own tow truck company. He can set his own schedule. It is a Limited Liability Company (LLC) and he works as an independent contractor. Nadine is not a member of the LLC, nor does she have an objection to the award of the LLC to Herman. It is currently in default status.

8. Nadine is a registered nurse with Advanced Health Care. Her usual schedule is Monday through Friday.

9. Herman vacated the marital residence which was a rental. Nadine came home March 8, 2019, to a U-Haul in the driveway and Herman and his friends emptying the house. They removed approximately 90% of the furniture. There was not a conversation about him leaving.

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Las Vegas, NV 89101

10. Herman took the children with him because he showed her paperwork from CPS that appeared he was to have the minor children. She later learned the paperwork was false. He moved approximately twenty-five minutes away from her.

11. Herman made multiple reports to CPS. One report alleged Nadine hit Abigail in the head with a PVC pipe. Nadine claimed all reports were unsubstantiated and that Abigail was coached by her father and grandmother.

12. Nadine tried to reach out to the children through Herman but he denied her access or contact. She only had contact with the children once before the court hearing in July of 2019. Herman took the children to meet her once for lunch before the court date.

13. After the July, 2019 hearing, the Court awarded Nadine visitations every Saturday between 10:00 a.m. – 6:00 p.m. The Court expanded her visitation to Friday to Monday visits after a review of the child interviews. They exchange the boys on Mondays between 7:30 a.m. – 7:40 a.m. She prepares breakfast for them but they usually prefer to wait until Herman picks them up because he will take them to McDonalds.

14. Abigail ended up moving in with Nadine in October of 2019. This schedule has been in place for over a year.

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Las Vegas, NV 89101

15. Herman was to engage in reunification therapy with Abigail but he has not started it. Herman was to have visitation with Abigail on weekends. Abigail did not have teen discretion but Herman has only exercised visitation with her once since October of 2019. There was an issue where Herman took away Abigail's vape pen during that visit. Nadine does not allow Abigail to smoke marijuana in her home. She has grounded Abigail by turning off her phone.

16. Abigail has tried to reach out to Herman but he has not responded. She reached out to his family and they also have not responded.

17. Herman has not attempted to communicate with Abigail. Nadine has not dropped off Abigail for visits with Herman.

18. Nadine has not spoken to Herman since June of 2019. First, Herman blocked her number and then he changed his number. Despite a court order to utilize a parenting app, he has yet to do so.

19. Although Nadine would not prevent a relationship with children, Herman prevents her from having a relationship with the children. He undermines her authority with the minor children and tells them that they do not have listen to her and that they can call 911.

20. After July 2019, Herman still prevented contact. He would communicate the children were not feeling well, or they just did not show up for exchanges.

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Family Division, Dept. I
Las Vegas, NV 89101

21. Nadine describes the level of conflict between herself and Herman as very high. If Herman feels someone has wronged him, he will do whatever he can to hurt you. He refuses to communicate with her at all.

22. Her (Nadine stated?) relationship with Abigail has approved drastically since she moved in with her. She and the boys have a good time during their visits, but it is difficult to co-parent with Herman.

23. An incident occurred on January 22, 2020. Nadine went to Herman's apartment to pick up Elisha. Herman reported to her that Elisha was sick and had been home all week. Herman refused to allow Elisha to leave with Nadine. As a result, she blocked the exit to the complex and refused to allow Herman to leave the complex. Abigail was present with Nadine during this incident.

24. Nadine filed her Financial Disclosure Form (FDF). She earns $9,583.00 every month. Her previous FDF reported an annual income of $159,265.55 for 2019. However, her company restructured and her position became salaried and not per diem.

25. When Nadine resided with Herman, he earned approximately $6,000.00 - $10,000.00 a month. Herman filed an FDF that claimed $5,666.00 a month but $11,300.00 a month for the total. She believes the $11,300.00.00 is the more accurate number. He also did not list any assets. She and Herman do not share bank accounts and neither possesses a retirement fund or stocks.

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Las Vegas, NV 89101

26. The Court previously granted Herman the 2015 Silverado to use in his tow business. Nadine had canceled registration of Silverado because she felt he was lying to obtain the vehicle. She did not notify him because she did not have a way to contact him. Herman has paid the 2021 registration on the Silverado. He dropped off a check to her attorney's office.

27. She was to pay for the registration and Herman was to pay the monthly payment on the loan and insurance, but he has not. Nadine made all the payments and requests reimbursement. In addition to the 2015 Silverado, she believes he is in possession of three more vehicles. Two other Silverado vehicles are utilized in his tow business.

28. Nadine also reported a break in to the police. She had two rings of a three piece ring set valued at $3,500.00 stolen during the break in. The police investigated and discovered that Herman had pawned the two rings.

29. In regards to debt, the community debt consists of a tax serve debt from Bridgeport for the taxes on the vehicles and a consolidation loan.

30. Nadine testified that Herman also possesses tools (wrenches, electric drills, saws, compressor, screwdrivers, etc.) that were purchased at a cost of approximately $15,000.00. The tools were purchased for a body shop they owned.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

31. At one point, Herman requested items previously left in the home. The items included a BBQ grill and a freezer. They communicated through attorneys in regards to the time to pick up the items. Herman did not retrieve the items.

32. In regards to the trampoline he requested, Nadine stated it was broken. She refused to give him the scaffold because she claims she purchased it.

33. Nadine purchased a printing machine. She obtained a loan of $35,000.00 (although she called it a lease). The machine is currently in a business in Jamaica where it was intended to be a secondary source of income for them. Nadine paid $1,500.00.00 a month until December of 2019. She does not own a business in Jamaica.

34. Herman Williams testified that he also requests the Court grant the divorce.

35. He would like to have a relationship with Abigail. The Court ordered that Nadine was responsible for payment of reunification therapy with Abigail. However, once Abigail moved back in with her, she cancelled the therapist.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

36. His last visitation with Abigail was in January of 2020. It was a weekend and he was supposed to have her until Monday. She locked herself in her room. Herman went to sleep and when he woke up, the patio door was open and Abigail was gone. He called the police and Nadine who told him that Abigail had not run away. However, Herman did not learn that Abigail was with Nadine until the boys returned home on Monday.

37. Herman does not know Abigail's phone number. He had purchased a phone for her but Nadine gave her a different phone so the phone he purchased was turned off.

38. Nadine does not drop off Abigail at exchanges. Herman chooses not to get out of his car at exchanges to avoid conflict and contact with Nadine. The Court ordered a talking app for the parties to communicate. He signed up on his one phone but Nadine did not accept him. His phone was stolen (he believes Abigail took it) and he did not have a phone with the ability to download an app until Christmas of 2020. Herman is now willing to install the app to communicate.

39. He never personally witnessed Nadine being violent towards the children but Abigail did call him about the incident in 2018. He personally does not use physical discipline with the children. He yells and screams at them.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

40. Herman prefers the current schedule. He describes his relationship with the boys as great. However, he has issues with the Monday exchanges. He requests a Sunday evening drop off due to the fact that Nadine is often late and the boys are hungry and their faces are dirty at the exchanges. They request McDonalds, although they only get McDonalds on Fridays.

41. There was an incident at his apartment complex on January 22, 2020 with Nadine. Her attorney contacted him that Nadine wanted visitation with Elisha. He was at work at the time and Elisha was ill and was on medication. She showed up with Abigail and knocked on the door. Herman attempted to leave in his vehicle but she blocked the exit. He eventually had to sneak out a side gate. As a result, he had to move out of the apartment complex.

42. Herman drives a tow truck. He is an independent contractor. He receives six calls a day via an app. He is paid by zone.

43. He mostly uses the 2015 Silverado to tow vehicles because it has a universal tow system. The 2004 Silverado is used but it is an undercarriage tow. If Nadine is awarded the 2015 Silverado, he will be unable to work.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

44. He prepared his FDF a week before the trial. He left town to visit his sick father. He forgot to add expenses and assets. Herman initially testified that he did earn the $11,300.00 a month but then corrected himself to state the $5,667.00 was more accurate.

45. Herman testified that he makes cash payments for the 2004 Silverado at $250.00 a month but that he does not have receipts. He pays approximately $2,000.00 a month for fuel for his vehicles. He drives them both for work and personal business.

46. He also pays $349.00 for his cell phone and the cell phone for the boys. Herman estimated he spends approximately $300.00 a month for his clothes.

47. Herman claims he does not own a single asset but when further questioned, he stated he estimates the 2015 Silverado to be worth $20,000.00 the 2004 Silverado to be worth $3,500.00 (although he still owes $1,000.00), and the 2001 Silver Chevy but he did not state the value. Herman was adamant that Nadine is not entitled to one half of the value of the vehicles.

48. Herman also has a hospital bill of over $68,000.00 to Dignity Health. However, he has not received a bill since April of 2019, and has not made any payments towards it. He does not know if Dignity Health has written it off or not.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

49. In regards to the debt consolidation, Nadine handled finances. Herman would be willing to pay half the debt if she brings back the machine that went to Jamaica. He was aware of the purchase at the time it was made but stated Nadine did not consult him prior to the purchase. Herman testified he gave her $6,000.00 to buy machine but did not provide receipts. He is unaware of the loan but believes it to be worth $34,000.00.

50. In regards to the compressor, tools and frame machine requested by Nadine, many items were thrown away before the move from New York to Las Vegas. Herman has purchased approximately $1,000.00 in tools since the two separated.

51. Phyllis Gayle testified that she is the mother of Nadine. She resided with Nadine and Herman in Connecticut and also moved to Las Vegas with them.

52. Phyllis currently resides with Herman and pays him rent.

53. Phyllis and Nadine were involved in an argument in February of 2019 when she told Nadine's boyfriend to get out of the house. Nadine grabbed her by the throat. She also pulled her outside, but due to her screaming, Nadine pulled her back into the house. The children were present during the incident. As a result, Phyllis injured her arm. The police were called and a report was taken but Phyllis stated she did not follow up. Nadine kicked her out of the house after the incident.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

54. Phyllis stated she witnessed Nadine become physical with the children on more than one occasion. She was present when Nadine struck Abigail with a piece of PVC pipe and cut her forehead.

55. Phyllis never called the police in regards to Nadine becoming violent with the children.

56. The FMC interviewed the children twice. The first interview occurred on August 19, 2019. The children noted that Nadine resorts to physical discipline using extension cords, gauge wires, belts, rubber insulation from the window and a pipe on one occasion. The result is that it sometimes leaves marks, or in the case of the pipe, a scar.

57. During this initial interview, Matthew rated his relationship with Nadine as a nine and with Herman, a ten. Abigail rated her relationship with Nadine a one and a ten with Herman. Herman III rated his relationship with Nadine a five and a nine with Herman. Elisha was too young to comprehend the scale, but when asked to describe his mother, he stated she beat him when he was asleep.

58. The second interview occurred on January 29, 2020. Matthew refused to participate. During the secondary interview, Herman III rated his relationship with Nadine as an eight and his relationship with Herman a ten. Elisha rated his relationships with both Herman and Nadine a ten. Elisha disclosed that Herman states that Nadine is very mean and calls her the 'F' word.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

59. Abigail rated her relationship with Nadine a nine and her relationship with Herman a one. Abigail stated she will not go back to Herman's house. She reported that Herman is very angry and vengeful and constantly trying to ruin Nadine.

60. The children reported that Herman lives with his "home girl" Kim. Nadine also has a significant other in her life, Stephen.

CONCLUSIONS

Nadine requests this Court grant her a divorce from Herman, joint legal custody and primary physical custody of the minor children. She does not request spousal support but that community debt is divided equally. Herman also requests this Court grant the divorce but requests sole legal and sole physical custody of Herman, Matthew and Elisha and joint legal custody of Abigail. He requests that the Court grant Nadine primary physical custody of Abigail. He also seeks child support and alimony in the amount of $1,000.00 a month. Both Nadine and Herman requests the Court grant them attorney's fees.

Both parties filed Motions for Orders to Show Cause, which were granted. However, neither party filed the Orders to Show Cause, or served the Orders on the appropriate parties. Therefore, the Orders to Show Cause are denied.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

I. CUSTODY

As to joint legal custody, NRS 125C.002 states:

> 1. When a court is making a determination regarding the legal custody of a child, there is a presumption, affecting the burden of proof, that joint legal custody would be in the best interest of a minor child if:
> (a) The parents have agreed to an award of joint legal custody or so agree in open court at a hearing for the purpose of determining the legal custody of the minor child; or
> (b) A parent has demonstrated, or has attempted to demonstrate but has had his or her efforts frustrated by the other parent, an intent to establish a meaningful relationship with the minor child.
> 2. The court may award joint legal custody without awarding joint physical custody.

The evidence established that both Nadine and Herman have frustrated the efforts of the noncustodial parent to establish a meaningful relationship with the minor children. As further discussed below, Herman refused to either communicate at all or sign up for the parenting app. He blocked Nadine's number and later changed his number without notice to her. He failed to appear for exchanges. Additionally, communication between the parties had to go through the attorneys for the parties.

Nadine frustrated Herman's attempts to maintain a meaningful relationship with Abigail. When he communicated with Nadine, when Abigail ran away, she never told him that Abigail was with her. Additionally, she did not enroll Abigail in reunification therapy or encourage Abigail to maintain her relationship with Herman.

Both parents attempted to frustrate the noncustodial parent's relationship with the children.

THEREFORE, IT IS ORDERED that Nadine and Herman shall share Joint Legal Custody of the minor children.

The Court must next consider presumptions against joint physical custody pursuant to NRS 125C.003 which states in relevant part:

> ***Best interests of child: Primary physical custody; presumptions; child born out of wedlock.***
> *1. A court may award primary physical custody to a parent if the court determines that joint physical custody is not in the best interest of a child. An award of joint physical custody is presumed not to be in the best interest of the child if:*
> *(a) The court determines by substantial evidence that a parent is unable to adequately care for a minor child for at least 146 days of the year;*
> *(b) A child is born out of wedlock and the provisions of subsection 2 are applicable; or*
> *(c) Except as otherwise provided in subsection 6 of NRS 125C.0035 or NRS 125C.210, there has been a determination by the court after an evidentiary hearing and finding by clear and convincing evidence that a parent has engaged in one or more acts of domestic violence against the child, a parent of the child or any other person residing with the child. The presumption created by this paragraph is a rebuttable presumption.*
> *2. A court may award primary physical custody of a child born out of wedlock to:*
> *(a) The mother of the child if:*
> *(1) The mother has not married the father of the child;*
> *(2) A judgment or order of a court, or a judgment or order entered pursuant to an expedited process, determining the paternity of the child has not been entered; and*

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

(3) The father of the child:
(I) Is not subject to any presumption of paternity under NRS 126.051;
(II) Has never acknowledged paternity pursuant to NRS 126.053; or
(III) Has had actual knowledge of his paternity but has abandoned the child.

There was evidence that Herman has not cared for Abigail at least 146 days of the year. There was also evidence that Nadine has not cared for Herman III, Matthew and Elisha for at least 146 days of the year. Therefore, Nadine has established a presumption that primary physical custody for Abigail is in her best interest. Herman has established a presumption that primary physical custody for Herman III, Matthew and Elisha is in their best interest. However, as further outlined below, primary physical custody by either Nadine or Herman is not in the best interest of the minor children.

The Court now turns its attention to NRS 125C.0035(5) which states:

> Except as otherwise provided in subsection 6 or NRS 125C.210, a determination by the court after an evidentiary hearing and finding by clear and convincing evidence that either parent or any other person seeking physical custody has engaged in one or more acts of domestic violence against the child, a parent of the child or any other person residing with the child creates a rebuttable presumption that sole or joint physical custody of the child by the perpetrator of the domestic violence is not in the best interest of the child. Upon making such a determination, the court shall set forth:

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

(a) Findings of fact that support the determination that one or more acts of domestic violence occurred; and

The Court finds by clear and convincing evidence that Nadine has committed two incidents of domestic violence. The first incident was between herself and Abigail, and the second incident occurred between herself and her mother.

(a) *All prior acts of domestic violence involving either party*;

The Court heard evidence of two incidents of domestic violence that involved Nadine.

Phyllis stated she witnessed Nadine become physical with the children on more than one occasion. She was present when Nadine struck Abigail with a piece of PVC pipe and cut her forehead. Abigail also reported the incident during the FMC interview.

The second incident Phyllis and Nadine were involved in an argument in February of 2019 when she told Nadine's boyfriend to get out of the house. Nadine grabbed her by the throat. She also pulled her outside, but due to her screaming, Nadine pulled her back into the house. The children were present during the incident. As a result, Phyllis injured her arm. The police were called and a report was taken but Phyllis stated she did not follow up. Nadine kicked her out of the house after the incident. The Court finds Phyllis credible.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

(b) The relative severity of the injuries, if any, inflicted upon the persons involved in those prior acts of domestic violence;

The Court heard testimony that Abigail suffered a cut to her forehead and as a result, still has a scar. Phyllis testified she suffered an injury to her arm after the incident.

(c) The likelihood of future injury;

The Court did not receive credible evidence that there was a likelihood of future injury. The Court previously ordered that neither parent was allowed to use corporal punishment on the children. The evidence the Court received after the order was in place expressed a change in Nadine's punishment of the children. During the second interview with FMC, they expressed positive relations with Nadine with no other incidents of physical discipline.

The evidence presented supports a finding that the incident with her mother was a one-time occurrence. Phyllis reports that she no longer lives with Nadine and that she and Nadine are not in communication with each other at this time. Therefore, the likelihood of future injury is minimal.

(d) Whether, during the prior acts, one of the parties acted in self-defense; and

The Court did not receive any evidence on this factor.

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(e) *Any other factors which the court deems relevant to the determination*.

The Court finds substantial evidence to establish by clear and convincing evidence that Nadine committed two acts of domestic violence. However, the Court subsequently ordered that she not utilize corporal punishment on the children. The evidence presented established through the FMC interviews that Nadine no longer utilizes corporal punishment on the children. She also no longer lives with her mother. Additionally, each child rated an improved relationship with Nadine after the initial FMC interview. Therefore, the Court finds that Nadine overcame the presumption that sole or joint physical custody of the child by the perpetrator of the domestic violence was not in the best interest of the minor children.

The Court must also consider the best interests of the parties' children by considering the factors established under NRS 125C.0035(4):

> *4. In determining the best interest of the child, the court shall consider and set forth its specific findings concerning, among other things:*

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(a) The wishes of the child if the child is of sufficient age and capacity to form an intelligent preference as to his or her physical custody.

At 16 years of age, Abigail is of sufficient age and capacity to form an intelligent preference as to her physical custody. Abigail rated her relationship with her dad as a one and her relationship with her mother as a nine. This is the direct opposite of her initial interview with FMC. Abigail described her relationship with her father as "horrible" and that they are not even on speaking terms. She does not wish to have anything to do with him.

Elisha rated his relationship with his mother as a ten and his relationship with his father as a ten. Elisha described the current scheduled as "fine." Herman rated his relationship with this mother as an eight, and his father a ten. Herman rated the current schedule as a five.

However, all three children related that Herman speaks negatively about Nadine. Herman tells the children that Nadine is "mean and calls her the 'F' word" and that she abused the children. Abigail reported her mother says Herman is vengeful. Elisha and Herman denied that Nadine speaks negatively about Herman.

(b) Any nomination of a guardian for the child by a parent.

Nomination of guardianship is not relevant in these proceedings between two parents and not involving a third party.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

(c) Which parent is more likely to allow the child to have frequent associations and a continuing relationship with the noncustodial parent.

The Court does not find in favor of either parent. The evidence established that both Nadine and Herman have frustrated the efforts of the noncustodial parent to establish a meaningful relationship with the minor children.

As further discussed below, Herman refused to either communicate at all or sign up for the parenting app. The Court did not find him credible when he testified that he did not have the ability to download the app because of his phone, especially when he later testified he used an app for his tow business. He also blocked Nadine's number and later changed his number without notice to her. He failed to appear for exchanges. His refusal to communicate resulted in the only communication between the parties available was through the attorneys. The children all revealed during the FC interview that Herman spoke in a disparaging manner about Nadine.

Nadine frustrated Herman's attempts to maintain a meaningful relationship with Abigail. When he did communicate with her when Abigail ran away, she never told him that Abigail was with her. Additionally, she did not enroll Abigail in reunification therapy or encourage Abigail to maintain her relationship with Herman.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

(d) The level of conflict between the parents.

The Court finds Nadine's favor. Both Nadine and Herman acknowledge the high level of conflict between them. The Court notes that Herman could not contain his anger at the notion that Nadine was entitled to community assets. His reaction supported the reports of Nadine and the children that he harbors extreme hostility towards Nadine. It further reflects his complete lack of ability to co-parent.

Herman III reported that his parents do not like each other at all. "They only talk if there's a problem and then it usually ends up in an argument. They just don't like each other, well, my dad doesn't like my mom." Abigail stated that Nadine "has tried, but my dad isn't having it. My father does things to create conflict." Nadine reported that Herman has blocked Nadine from calling him, changed his number and not told Nadine and doesn't follow the Court order for time between Abigail and her siblings.

(f) The mental and physical health of the parents.

The Court did not receive testimonial evidence in regards to this factor. However, Herman admitted his Dignity Health hospital records from November 24, 2018, when he was detained on a Legal 2000 for suicidal ideation. He was admitted.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

(g) The physical, developmental and emotional needs of the child.

The Court did not receive evidence in regards to this factor.

(h) The nature of the relationship of the child with each parent.

The Court finds this factor to be neutral between Nadine and Herman. Despite their efforts to damage the noncustodial parent's relationship with the minor children, they appear to be balancing the high conflict custody situation better than their parents. Matthew did not participate in the second interview but both Elisha and Herman III rate their relationships with both Nadine and Herman favorably.

Abigail has changed her ratings of her relationship with Nadine and Herman from a one to a nine to a nine to a one. At the age of 16 years, the Court is unclear as to whether she is manipulating one parent against the other for her own gain. However, it is clear to this Court, that Herman must repair his relationship with Abigail, which he has expressed a desire to do.

(i) The ability of the child to maintain a relationship with any sibling.

The Court finds this factor neutral. The minor children are able to maintain their relationships with each other. The boys are together at all times and see Abigail at their mother's house.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

(j) Any history of parental abuse or neglect of the child or a sibling of the child.

The Court addressed the issue of parental abuse in its analysis above.

(k) Whether either parent or any other person seeking physical custody has engaged in an act of domestic violence against the child, a parent of the child or any other person residing with the child.

The Court addressed this issue in more detail above.

(l) Whether either parent or any other person seeking physical custody has committed any act of abduction against the child or any other child.

There was no credible evidence in regards to this factor.

THE COURT CONCLUDES that neither Nadine nor Herman met their burden to establish that an award of primary physical custody is in the minor children's best interest. The Court is extremely concerned about the effect of the separation, divorce proceedings and the antics of the parties on Abigail. The Court is disheartened that the counseling previously ordered did not occur. The Court will not reward either parent in their attempts to gain primary custody of the minor children through pathogenic parenting.

The Court is persuaded by the positive relationship described by the children supports joint custody. Additionally, the Court finds that both parents would benefit from the UNLV Cooperative Parenting Class, which the Court is ordering at this time.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

THE COURT FINDS that Joint Physical Custody is in the minor children's best interest.

In regards to child support, NAC 425.115 states:

> ***Determination of child support obligation in accordance with guidelines if no stipulation; adjustment of obligation based upon type of custody held by parent.***
> 1. *If the parties do not stipulate to a child support obligation pursuant to NAC 425.110, the court must determine the child support obligation in accordance with the guidelines set forth in this chapter.*
> *2. If a party has primary physical custody of a child, he or she is deemed to be the obligee and the other party is deemed to be the obligor, and the child support obligation of the obligor must be determined.*

Both parties filed FDFs, however, Herman's did not include any assets. Additionally, Herman only included three pay sheets that do not adequately demonstrate his monthly income.

Herman is not paid hourly, he is paid as a tow truck driver per job. However, his invoice does not reflect the correct numbers of days. The Court is unsure if it is due to the holidays or other reasons undisclosed.

The Court does not find Herman credible in regards to his income. He testified he works at least five days a week and utilizes an app for six tows a day. Based upon his invoice, the tow rate varies from as low as $34.00 (which made up the majority) to up to $56.00 (on only one occasion). At six tows per day, Herman would earn $204.00 minimum per day. This calculation is not supported by the evidence provided to the Court.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

The Court's analysis is further supported by a review of Herman's bank statements. *See* HGW303 – 345. His lowest payment received was on October 2, 2020, for $870.00. His highest compensation was $1,788.00 received on September 4, 2020. The Court did not receive bank statements from January, April, May or June. His yearly compensation for the remaining months was $73,322.00 for thirty –two weeks of work. That averages to $2,291.31 per week. The yearly wage for Herman is actually $114,566.00 (factoring in two unpaid weeks for vacation, etc.), which equates to $9,547.00 a month, the amount the Court now imputes as income to Herman. Additionally, Herman receives $700.00 a month rent from his mother-in-law, which increases his gross income to $10,247.00 a month.

Nadine's gross income on her FDF is listed as $9,583.00. However, her pay stubs reflect a biweekly salary of $4,791.67, which would equate to gross income of $145,583.00 per year, or $10,382.00 per month.

Therefore, Herman's monthly obligation comes to $9.45 a month. The Court finds the disparity of income between the parties to be negligible and therefore, pursuant to NAC 425.100, the Court will not order child support. However, Nadine also provides health insurance for the children in the amount of $417.00 a month. Herman is responsible for one half of that amount, or $208.50. Therefore Herman's total obligation is therefore $208.50 due on the first of every month.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

II. DIVISION OF PROPERTY AND DEBT

A. Community Property

NRS 125.150(1)(b) provides that:

> In granting a divorce, the court . . . [s]hall, to the extent practicable, make an equal disposition of the community property of the parties, except that the court may make an unequal disposition of the community property in such proportions as it deems just if the court finds a compelling reason to do so and sets forth in writing the reasons for making the unequal disposition.

Under NRS 125.150(1), the Court is required to make an equal division of community property (the exact portion of which is unknown) absent a compelling reason to make an unequal distribution.

In regards to other community assets and debts, the Court finds the following:

a) Bank Accounts

The Court did not receive any credible evidence of the value of the parties' bank accounts, leaving the only method of dividing the account to equally divide the balances. In this regard, however, it makes sense for each party to identify and keep any bank accounts in their individual names. If a joint bank account exists, it is to be equally divided.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

b) Vehicles

It is undisputed that the 2015 Silverado, 2001 Chevy and 2004 Silverado are community property. Additionally, Nadine's insurance statements list a 2010 GMC Acadia and a 2019 Chevy Traverse, however, other than the $150.00 a month listed on Nadine's FDF for car loan/lease, the Court did not receive any evidence related to these vehicles, or the value of each. *See* Plaintiff's Exhibit 2. Herman testified that although he failed to list it on his FDF, he pays per month $250.00 cash for the 2004 Silverado. Herman did not state the value of the 2001 Chevy.

Nadine requested the Court award her the 2015 Silverado. Nadine did not give a basis for her request for the 2015 Silverado, other than she made payments on it and she pays for insurance. The payments made for the Silverado were made from community assets even if the funds came from her separate account. It is undisputed that this vehicle and the 2004 Silverado are utilized in Herman's tow business which causes the Court to find Nadine not credible as to her request for the 2015 Silverado. It appears the request was based on spite, which is further supported by the evidence the Court heard in regards to the relationship between Herman and Nadine. As outlined in her FDF and insurance paperwork, Nadine possesses one or two vehicles. The Court does not find it credible that she needs the 2015 Silverado as her third vehicle.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

The Court does not have sufficient evidence to determine the value of any vehicles in Nadine's possession. The Court awards each party the vehicles in their possessions. Nadine is to receive one half the value of the 2015 Silverado, 2001 Chevy and the 2004 Silverado from Herman based upon the Bluebook average value for a private sale of each vehicle. This will be completed within thirty (30) days of the entry of this Order.

c) Retirement

Neither party testified as to retirement accounts. Therefore, the Court did not consider retirement accounts in its analysis.

d) Life Insurance

The Court did not receive competent testimony that either party has a life insurance policy, therefore, it was not considered in its analysis.

e) Credit Cards

Nadine listed extensive debt in her FDF. She included debt for credit cards in the amount of $16,634.00. It was not disputed that the debt was accumulated during the marriage. Each party shall be responsible for one half the debts for the credit cards.

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f) Other debt

Nadine listed additional debt to Freedom Financial for $22,486.00, Consolidation Plus loan of $21,617.00, Equiant Financial Services for $7,641.00, Tax Serv for Bridgeport of $8,270.78, Global Finance for $29,800.00, and student loans for $76,195.00. The Court did not receive any evidence that any property was the separate property of either Herman or Nadine, therefore, the Court will treat the debts as community property.

Herman failed to properly prepare his FDF. The Court was able to determine debts to Midland Credit Management statement in the amount of $729.00 (HGW 007), Wakefield and Associates in the amount of $1,348.22 (HGW 011), and Americollect in the amount of $1,872.00. It is undisputed that the debts were community debt.

Herman submitted documents from the IRS that outlines an outstanding balance and a payment agreement (HGM 279-302). The Court did not receive any evidence, other than the exhibits, in order to determine the extent of the debt, if any. The Court orders that the parties will equally divide any tax debt, if any, incurred during the marriage.

Herman also provided medical bills from Dignity Health totaling $75,627.30 (HGM 001, 009), Emergency Physician Statement in the amount of $1,300.00 (HGM 002), Digestive Associates for $677.00, and Bessler MD for $663.43. It is undisputed that the debts were community debt.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

Each party shall be responsible for one half of the other debt with Herman assuming the Dignity Health debt and Nadine assuming the student loan debt as follows with Herman taking an additional amount of debt to offset the $5,126.59 owed for the 2015 Silverado reimbursement outlined in subsection B below:

OTHER DEBT	Nadine	Herman
Freedom Financial	$ 22,486.00	
Equiant Financial Services	$ 7,641.00	
Consolidation Plus		$ 21,617.00
TaxServe for Bridgeport		$ 8,270.78
Midland Credit management		$ 729.00
Global Finance	$ 14,900.00	$ 14,900.00
Wakefield and Associates		$ 1,349.00
Americollect		$ 1,872.00
Emergency Physician		$ 1,300.00
Digestive Associates		$ 677.00
Bessler MD		$ 664.00
	$ 45,027.00	$ 51,378.78

(f) anything else?

Nadine had two rings stolen from the house. It was undisputed that the rings were Nadine's separate property (wedding rings). Herman pawned the rings for $3,500.00. The Court orders that Herman will reimburse Nadine the value of the two rings pawned.

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Nadine requested one half of the value of the tools in Herman's possession. Herman stated most of the tools were sold prior to the move to Las Vegas but tools in his possession were purchased for $1,000.00. Herman requested the return of numerous items, including scaffolding and other items. The Court orders that each party will retain the personal tools and other equipment currently in their possession which appear to be roughly equal in value.

B. Business debts and assets

Herman runs his own company, Exquisite Towing Roadside Assistance. The Court only received information in regards to private vehicles utilized for the company as the only assets of the company, along with a bank account that appears to be utilized for Herman's private expenses as well.

It is undisputed the company was started during the marriage. However, Nadine expressly testified that the business be awarded to Herman. As a business valuation was not completed, the Court did not receive competent testimony in order to divide assets or debts, if any.

However, pursuant to the December 16, 2019 orders of Judge Steel, Herman was to pay all expenses related to the 2015 Silverado, with the exception of the registration. Therefore, Herman is ordered to reimburse

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Nadine for the insurance paid on the vehicle from December 16, 2019 to present in the amount of $3, 265.00 ($1,361.00 + $1,104.00 + $800.00). (Exhibit 2). Additionally, Herman is ordered to pay for the finance payments to Chase Auto in the amount of $1,861.59. (Exhibit 3). The Court has compensated for the amount owed to Nadine by allocating additional debt to Herman for the $5,127.00.

The Court awards Exquisite Towing Roadside Assistance to Herman along with any assets or debts in its name.

ALIMONY

Herman is seeking alimony in the amount of $1,000.00 per month. NRS 125.150(1)(a) provides that in granting a divorce, the Court "[m]ay award such alimony to either spouse, in a specified principal sum or as specified periodic payments, as appears just and equitable." Alimony may be awarded to narrow the gap between the parties' respective financial circumstances after divorce and to help maintain the marital standard of living to the lower income spouse. Kogod v. Cioffi-Kogod, 439 P.2d 397 (April 25, 2019) citing Wright v. Osburn, 112 Nev, 1367, 970 P.2d 1071 (1998). His request is unreasonable and not supported by any of the evidence presented, especially in light of the fact his monthly income exceeds that of Nadine's income.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

In making a "just and equitable" determination, the Court is required to apply NRS 125.150(9) which provides as follows:

(a) The financial condition of each spouse;

The community has substantial debt of approximately $248,229.00. Nadine and Herman will split this substantial debt. That debt includes vehicles, business debt, medical debt and personal debt. The assets are limited. A total of possibly four vehicles, personal and business bank accounts of an unknown accumulated value, and whatever furniture and personal effects are currently in their possessions. The Court did not receive competent evidence as to the furniture and personal effects in the possession of each party, nor their value.

Herman claimed he cannot pay his monthly bills and that he is deeply in debt. However, the Court calculated his monthly actual income of approximately $9,547.00, plus the $700.00 a month rent paid by his mother in law for a total of $10,247.00. Herman's monthly expenses, pursuant to his FDF and testimony, equal approximately $8,106.00. This leaves Herman with a balance of $2,829.00. Nadine's balance after expenses is $1,465.00. Herman has the superior financial position on a monthly basis.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

(b) The nature and value of the respective property of each spouse;

The Court did not receive evidence in regards to the value of furniture or personal belongs of each party. Therefore, the analysis is based on the evidence that was provided to the Court. In regards to physical property, Herman has property, consisting of vehicles, valued substantially higher than Nadine's property.

(c) The contribution of each spouse to any property held by the spouses pursuant to NRS 123.030;

This factor is not relevant.

(d) The duration of the marriage;

This is a marriage of almost seventeen (17) years.

(e) The income, earning capacity, age and health of each spouse

Herman and Nadine are both healthy. There is no reason why either party cannot continue to earn an income.

(f) The standard of living during the marriage;

There was little information concerning the standard of living during the marriage. However, the parties have amassed a significant debt of over $200,000.00 that will be divided equally between them.

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(g) The career before the marriage of the spouse who would receive the alimony;

There was no evidence provided to the Court in regards to this factor.

(h) The existence of specialized education or training or the level of marketable skills attained by each spouse during the marriage;

There was no evidence that either party obtain specialized education or training during the marriage.

(i) The contribution of either spouse as homemaker;

The Court did not receive any competent, reliable evidence that either party sacrificed a career in order to stay at home.

(j) The award of property granted by the court in the divorce, other than child support and alimony, to the spouse who would receive the alimony; and

Herman will receive significantly more property than Nadine, subject to an equalization payment of the value of the three vehicles in his possession.

(k) The physical and mental condition of each party as it relates to the financial condition, health and ability to work of that spouse.

There is no evidence that either party suffers physical or mental impediments to maintaining their current careers.

The Court concludes that based upon the financial conditions of the party an award of alimony to Herman would not be fair and equitable.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

THE COURT FINDS that Nadine is now and has been an actual bona fide resident of the State of Nevada and has been actually domiciled in the State of Nevada for more than six weeks immediately prior to the commencement of this action.

THE COURT FURTHER FINDS that Nadine and Herman were married on March 2, 2004 and have since remained married. The parties have become, and continue to be, incompatible in marriage, and no reconciliation is possible.

NOW, THEREFORE, IT IS HEREBY ORDERED that Nadine shall assume, indemnify and hold Herman harmless from any debts and obligations in her individual names.

IT IS FURTHER ORDERED that Herman shall assume, indemnify and hold Nadine harmless from any debts and obligations in his individual names.

IT IS FURTHER ORDERED that Nadine shall retain any bank accounts or property in her individual name.

IT IS FURTHER ORDERED that Herman shall retain any bank accounts or property in his individual name.

IT IS FURTHER ORDERED that neither party shall be awarded alimony.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

IT IS FURTHER ORDERED that Herman will pay Nadine an asset equalization of one half the Bluebook value (for a private sale) of the 2015 Silverado, 2001 Chevy and the 2004 Silverado. Said sum is reduced to judgment with a stay of execution and interest contingent upon timely payment in the amount of $150.00 a month due before the 15th day of each month commencing on April 15, 2021. If Herman fails to make a payment by the assigned monthly date, the stay on said sum is lifted and becomes immediately due and payable with any interest that has accrued.

IT IS FURTHER ORDERED that Herman will pay Nadine an asset equalization of $3,500.00 for the sale of the rings. Said sum is reduced to judgment with a stay of execution and interest contingent upon timely payment in the amount of $50.00 a month due before the 15th day of each month commencing on April 15, 2021. If Herman fails to make a payment by the assigned monthly date, the stay on said sum is lifted and becomes immediately due and payable with any interest that has accrued.

NOW, THEREFORE, based upon the foregoing *Findings of Fact and Conclusions of Law* and good cause appearing therefore:

IT IS HEREBY ORDERED that the bonds of matrimony now existing between the parties are hereby wholly dissolved, and an absolute Decree of Divorce is hereby granted to the parties, and each of the parties are hereby restored to the status of a single, unmarried person.

Sunny Bailey
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Family Division, Dept. I
Las Vegas, NV 89101

CHILD CUSTODY AND CHILD SUPPORT ORDER

NOW, THEREFORE, IT IS FURTHER ORDERED that Herman and Nadine shall exercise Joint Legal Custody of the minor children and that the parties shall abide by the following joint legal custody provisions:

A. The parties shall consult and cooperate with each other in substantial questions relating to religious upbringing, educational programs, significant changes in social environment, and health care of the child.

B. The parties shall have access to medical and school records pertaining to the child and be permitted to independently consult with any and all professionals involved with the child.

C. The parties shall participate in decisions regarding all schools attended, and all providers of child care of the parties' minor child.

D. Each party shall be empowered to obtain emergency health care for the child without the consent of the other party. Each party is to notify the other party as soon as reasonably practicable of any illness requiring medical attention, or any emergency involving the child.

E. Each party is to provide the other party, upon receipt, information concerning the well-being of the child, including, but not limited to, copies of report cards; school meeting notices; vacation

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

schedules; class programs; requests for conferences; results of standardized or diagnostic tests; notices of activities involving the child; samples of school work; order forms for school pictures; all communications from health care providers; the names, addresses, and telephone numbers of all schools, health care providers, regular day care providers and counselors.

F. Each party is to advise the other party of the school, athletic, and social events in which the child participates. Both parties may participate in activities for the child, such as open house, attendance at an athletic event, etc.

G. Each party is to provide the other party with the address and telephone number at which the minor child resides, and to notify the other party prior to any change of address and provide the telephone number as soon as it is assigned.

H. Each party is to provide the other party with a travel itinerary and, whenever reasonably possible, telephone numbers and addresses at which the child can be reached whenever the child will be away from the parties' home for a period of two (2) nights or more.

I. Each party shall be entitled to reasonable telephone communication with the child. Each party is restrained from

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

unreasonably interfering with the child's right to privacy during such telephone conversation. Telephone conversations shall be initiated either by the child or parent and are to occur during reasonable household hours.

IT IS FURTHER ORDERED that Nadine and Herman shall exercise Joint Physical Custody of the minor children.

IT IS FURTHER ORDERED that due to the negligible disparity of income between the parties, the Court, pursuant to NAC 425.100, does not order child support.

IT IS FURTHER ORDERED that Herman is responsible for one half of the amount for insurance provided by Nadine, or $208.50, payable on the first of every month.

IT IS FURTHER ORDERED that Nadine shall secure and pay for reunification counseling for Herman and Abigail and transition Abigail into the joint physical custody.

IT IS FURTHER ORDERED that reunification counseling will begin no less than thirty (30) days from the entry of this order.

IT IS FURTHER ORDERED that Abigail's timeshare will follow the recommendation of the reunification counselor until the time schedule matches the schedule for the other minor children (week on/week off), or June 1, 2021, whichever occurs first.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

IT IS FURTHER ORDERED that Herman III, Matthew and Elisha's (and Abigail's after June 1, 2021) timeshare shall be as follows:

Week 1 (Nadine): Sunday 6:00 p.m. to the following Sunday 6:00 p.m.

Week 2 (Herman): Sunday at 6:00 p.m. to the following Sunday 6:00 p.m.

IT IS FURTHER ORDERED that the receiving parent shall provide the transportation for the child custody exchange. All exchanges are to occur in a mutually agreed upon public location. Should the parties not agree to a public location, exchanges will occur at Donna's House located at 601 N. Pecos, Las Vegas, NV. Upon request an order will be issued for the supervised exchanges with the parties equally dividing the costs.

IT IS FURTHER ORDERED that neither party shall make any negative comments about the other party.

IT IS FURTHER ORDERED that the non-custodial parent shall have unsupervised daily communication with the minor children by phone or video each evening between 7:00 p.m. and 7:30 p.m.

IT IS FURTHER ORDERED that the parties will follow the Department I Holiday Schedule outlined in Exhibit 1.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

IT IS FURTHER ORDERED that the parties shall utilize a parenting app which, absent an emergency, shall be the exclusive means of communication between the parties. The parties shall engage in polite, respectful communications concerning the minor children.

IT IS FURTHER ORDERED that all significant others shall remain in the background and shall not be allowed to interfere in communications between the parties. They shall not be permitted to participate in the kind of activities in which legal custody is required such as a health care appointment, a parent/teacher conference, etc. They shall, however, be permitted to attend public events such as a performance or school event. Neither parent may allow anyone else to share the title "mom," "mother," "mommy," "dad," "father," "daddy," or anything else similar.

IT IS FURTHER ORDERED that Herman's monthly child support obligation comes to $9.45 a month. The Court finds the disparity of income between the parties to be negligible and therefore, pursuant to NAC 425.100, the Court will not order child support.

IT IS FURTHER ORDERED that any unreimbursed medical, dental, optical, orthodontic or other health related expenses incurred for the minor child shall be divided equally between the parties. Either party incurring an out-of-pocket health care expense shall provide a copy of the paid invoice/ receipt to the other party within 30 days of incurring such expense. If the

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

invoice/receipt is not tendered within the thirty day period, the Court may consider it as a waiver of reimbursement. The other party will then have 30 days from receipt within which to dispute the expense in writing or reimburse the incurring party for one-half of the expense. If not disputed or paid within the 30 day period, the party may be subject to a finding of contempt and appropriate sanctions.

IT IS FURTHER ORDERED that for the tax year 2020 forward, Herman shall be entitled to claim as tax dependents Herman III and Elisha in all years, and Nadine shall be entitled to claim as tax dependents Abigail and Matthew. As each minor child emancipates, if one of the parties can claim only one minor child while the other party claims two, then Herman shall be entitled to claim Elisha as a tax dependent on even years and Nadine shall be entitled to claim Elisha as a tax dependent on odd years. Once all the minor children except Elisha emancipates, Herman shall be entitled to claim Elisha as a tax dependent on even years and Nadine shall be entitled to claim Elisha as a tax dependent on odd years.

IT IS FURTHER ORDERED that the parties shall exchange their tax returns, together with all schedules and forms, no later than April 30 annually for the purpose of determining whether there has been a change in circumstance justifying revisiting the child support obligation.

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

STATUTORY NOTICES

NOTICE IS HEREBY GIVEN that pursuant to NRS 125C.0045(6):

PENALTY FOR VIOLATION OF ORDER: THE ABDUCTION, CONCEALMENT OR DETENTION OF A CHILD IN VIOLATION OF THIS ORDER IS PUNISHABLE AS A CATEGORY D FELONY AS PROVIDED IN NRS 193.130. NRS 200.359 provides that every person having a limited right of custody to a child or any parent having no right of custody to the child who willfully detains, conceals or removes the child from a parent, guardian or other person having lawful custody or a right of visitation of the child in violation of an order of this court, or removes the child from the jurisdiction of the court without the consent of either the court or all persons who have the right to custody or visitation is subject to being punished for a category D felony as provided in NRS 193.130.

NOTICE IS HEREBY GIVEN that pursuant to NRS 25C.0045(7)(8): The terms of the Hague Convention of October 25, 1980, adopted by the 14th Session of the Hague Conference on Private International Law, apply if a parent abducts or wrongfully retains a child in a foreign country as follows:

If a parent of the child lives in a foreign country or has significant commitments in a foreign country:

(a) The parties may agree, and the court shall include in the order for custody of the child, that the United States is the country of habitual residence of the child for the purposes of applying the terms of the Hague Convention as set forth in subsection 7.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

(b) Upon motion of one of the parties, the court may order the parent to post a bond if the court determines that the parent poses an imminent risk of wrongfully removing or concealing the child outside the country of habitual residence. The bond must be in an amount determined by the court and may be used only to pay for the cost of locating the child and returning the child to his or her habitual residence if the child is wrongfully removed from or concealed outside the country of habitual residence. The fact that a parent has significant commitments in a foreign country does not create a presumption that the parent poses an imminent risk of wrongfully removing or concealing the child.

NOTICE IS HEREBY GIVEN that, pursuant to NRS 125C.0065:

1. If JOINT PHYSICAL CUSTODY has been established pursuant to an order, judgment or decree of a court and one parent intends to relocate his or her residence to a place outside of this State or to a place within this State that is at such a distance that would substantially impair the ability of the other parent to maintain a meaningful relationship with the child, and the relocating parent desires to take the child with him or her, the relocating parent shall, before relocating:

(a) Attempt to obtain the written consent of the non-relocating parent to relocate with the child; and

(b) If the non-relocating parent refuses to give that consent, petition the court for primary physical custody for the purpose of relocating.

2. The court may award reasonable attorney's fees and costs to the relocating parent if the court finds that the non-relocating parent refused to consent to the relocating parent's relocation with the child:

(a) Without having reasonable grounds for such refusal; or

(b) For the purpose of harassing the relocating parent.

3. A parent who relocates with a child pursuant to this section before the court enters an order granting the parent primary physical custody of the child and permission to relocate with the child is subject to the provisions of NRS 200.359.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

NOTICE IS HEREBY GIVEN that the non-custodial parent may be subject to the withholding of wages and commissions for delinquent payments of support pursuant to NRS 31A.010, *et. seq.* and NRS 125.007.

NOTICE IS HEREBY GIVEN that pursuant to NRS 125B.145, the parties may request a review of child support every three years, or at any time upon changed circumstances.

NOTICE IS HEREBY GIVEN that both parties shall submit the information required by NRS125B.055, NRS 125.30 and NRS 125.230 on a separate form to the Court and to the Welfare Division of the Department of Human Resources within ten days from the date this Order is filed. Such information shall be maintained by the Clerk in a confidential manner and not part of the public record. The parties shall update the information filed with the Court and the Welfare Division of the Department of Human Resources within ten days should any of that information become inaccurate.

NOTICE IS HEREBY GIVEN that if you want to adjust the amount of child support established in this order, you MUST file a motion to modify the order with or submit a stipulation to the court. If a motion to modify the order is not filed or a stipulation is not submitted, the child support obligation established in this order will continue until such time as all children who are the subject of this order reach 18 years of age or, if the youngest child

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Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

who is subject to this order is still in high school when he or she reaches 18 years of age, when the child graduates from high school or reaches 19 years of age, whichever comes first. Unless the parties agree otherwise in a stipulation, any modification made pursuant to a motion to modify the order will be effective as of the date the motion was filed.

IT IS FURTHER ORDERED that each party shall assume their own attorney fees and costs.

IT IS FURTHER ORDERED Attorney Frank Toti shall file the Notice of Entry of Order of this Decision and Order.

Dated this 26th day of February, 2021

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Sunny Bailey
District Court Judge

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

EXHIBIT 1

Eighth Judicial District Court
Department I – Family Division
Holiday and Vacation Plan

This schedule shall remain in effect unless: (1) the parties agree in writing, signed by both parties, to an alternate schedule; or (2) by subsequent order of the Court.

Precedence:

The *holiday* schedule shall take precedence over *vacation* periods; and *vacation* periods shall take precedence over regular timeshare periods. Where there is an overlap of conflicting holidays, the following priority shall prevail:

	Odd Year	Even Year
Overlap Precedent	DAD	MOM

Weekend Holidays

The parents will share weekend holidays based on the following schedule. The holiday weekend begins upon the release of school for the holiday period and continues until the morning school resumes following the holiday, at the first morning bell, unless otherwise noted. In the event that school is not in session, the following holiday time will begin on Friday at 3:00 p.m., and continue until 9:00 a.m., on the first weekday following the holiday.

	Odd Year	Even Year
Martin Luther King Day Weekend	MOM	DAD
President's Day Weekend	DAD	MOM
Mother's Day Weekend	MOM	MOM
Memorial Day Weekend	MOM	DAD
Father's Day Weekend	DAD	DAD
Independence Day[1]	DAD	MOM
Labor Day Weekend	MOM	DAD
Nevada Admission Day Weekend	DAD	MOM
Halloween Day[2]	DAD	MOM
Veterans' Day Weekend[3]	MOM	DAD

[1] Independence Day will include the weekend if the holiday occurs on a Friday, Saturday, Sunday or Monday of any given year. In the event the holiday occurs on Tuesday, Wednesday or Thursday, it will be treated as a one day holiday and shall begin at 9:00 a.m. on July 3rd and continue until July 5th at 9:00 a.m.

[2] Halloween will be celebrated as a one day holiday, beginning upon the release of school, or 9:00 a.m., if school is not in session, and continuing until the next morning when school resumes or 9:00 a.m., if school is not is session.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

Birthdays

The parents will share birthdays based on the schedule set forth below. The birthday schedule will begin after school on the birthday (or if school is not in session, at 9:00 a.m.) and continue until the morning following the birthday at 9:00 a.m., or when school begins, at the first morning bell, if school is in session, when the regular residential schedule will resume. The designated parent shall be entitled to have ALL of the parties' children in his/her care during the birthday period.

	Odd Year	Even Year
Children's Birthdays	MOM	DAD

Easter/Spring Break

The parents will share the Easter/Spring Break based on the following schedule, with the holiday period to begin upon the release of school for the holiday period and continue until school resumes following the Spring Break at the first morning bell.

	Odd Year	Even Year
Easter/Spring Break	DAD	MOM

Thanksgiving

The parents will share the Thanksgiving Break based on the following schedule, with the holiday period to begin upon the release of school before Thanksgiving and shall continue until school resumes following the holiday.

	Odd Year	Even Year
Thanksgiving Break	MOM	DAD

Winter Break

The Winter Break holiday period will be divided into two segments based on the school calendar. Specifically, the first segment will begin on the day the school calendar releases for the break and shall continue until December 26th at 12:00 p.m. (noon), when the other parent's timeshare shall begin, to continue until school resumes following the Winter Break.

	Odd Year	Even Year
First Segment/Christmas	DAD	MOM
Second Segment/New Year's	MOM	DAD

Religious Holidays

When parents do not share the same religious beliefs, each parent shall have the right to provide religious instruction of their choosing to the child(ren). When both parents are of the same faith, both parents shall have the opportunity to enjoy the right to celebrate a religious holiday with the child(ren) on an alternating year basis. The following sample religious holiday schedules are intended to provide examples of shared holiday schedules

[3] Veterans' Day will include the weekend if it is attached to a weekend holiday period. In the event the holiday is celebrated as a one-day holiday by the school district, it shall begin at 9:00 a.m. on November 11th and continue until November 12th at 9:00 a.m. In the event the school district does not provide a release from school for Veterans' Day, neither party shall be entitled to a variance from the regular timeshare for this holiday period.

for religious holidays and apply *only if* one or both parents have traditionally celebrated such holidays with the parties' child(ren):

Sample Jewish Holiday

The following holidays begin upon the release of school before the holiday period, or if school is not in session at 3:00 p.m., and continue as designated until school resumes the day after the holiday period, or if school is not in session at 9:00 a.m.:

	Odd Year	Even Year
Passover [1st two nights]	DAD	MOM
Rosh Hashanah [2 day holiday]	MOM	DAD
Yom Kippur [One day holiday]	DAD	MOM
Purim [One day holiday]	MOM	DAD
Sukkot [1st two nights]	DAD	MOM
Hanukkah [1st two nights]	MOM	DAD

Sample Baha'i Holy Days and Commemorative Days

The following holidays, when work is to be suspended, begin upon the release of school before the holiday period, or if school is not in session at 3:00 p.m., and continue as designated until school resumes the day after the holiday period, or if school is not in session at 9:00 a.m.:

	Odd Year	Even Year
Naw-Ruz March 21	DAD	MOM
Festival of Ridvan April 21	MOM	DAD
Declaration of the Bab May 23	DAD	MOM
Ascension of Baha'u'Ilah May 29	MOM	DAD
Martyrdom of Bab July 9	DAD	MOM
Birth of the Bab October 20	MOM	DAD
Birth of Baha'u'Ilah November 12	DAD	MOM

Summer/Track Vacation

Each parent shall have on fourteen (14) day uninterrupted summer timeshare with the child(ren) per year during the period of summer or track release for the Clark County School District. The fourteen (14) day period may not be added to regular timeshare dates

to extend a parent's summer vacation beyond fourteen (14) days without the written consent of the other party.

The parent with selection priority shall provide notice of his/her summer vacation dates in writing via email by March 1st with the other parent providing notice of her/his summer vacation dates in writing via email by March 15th . Track vacation dates must be designated at least thirty (30) days before the track break begins. Failure to provide notice of summer/track vacation dates by deadline provided shall constitute a waiver of priority and the other party shall have the right to provide written notice of his/her summer/track vacations dates, which shall take precedence for that year only. If a party does not provide written notice of his or her vacation dates by May 1st, that party shall have waived his/her right to exercise a vacation period for that year only.

	Odd Year	Even Year
Vacation Selection Priority	DAD	MOM

Year-Round School

In the event the parties' child(ren) attend year round school, the regular timeshare shall continue during all track breaks unless: (1) either party has designated a vacation period, as set forth above, or (2) otherwise agreed in a writing signed by both parties.

In-Service/Professional Development Days

Undesignated school holidays shall follow the parties' regular timeshare schedule. However, in the event an in-service day is attached to a weekend or other holiday period, the undesignated holiday shall attach to the weekend or other holiday period and the parent assigned the weekend or holiday period (including any undesignated period) until school resumes following the weekend or other holiday period, at the first morning bell.

Transportation

The receiving parent shall be responsible for providing transportation, unless otherwise ordered by the Court.

Sunny Bailey
DISTRICT JUDGE
Family Division, Dept. I
Las Vegas, NV 89101

CSERV

DISTRICT COURT
CLARK COUNTY, NEVADA

Nadine Alecia Williams, Plaintiff vs. Herman George Williams, Defendant.	CASE NO: d-19-586291-d DEPT. NO. Department I

AUTOMATED CERTIFICATE OF SERVICE

This automated certificate of service was generated by the Eighth Judicial District Court. The foregoing Decision and Order was served via the court's electronic eFile system to all recipients registered for e-Service on the above entitled case as listed below:

Service Date: 2/26/2021

Frank Toti	frank@fjtesq.com
Kenneth Robbins, Esq.	FamilyFirst@HalfPriceLawyers.com
David Barragan	david@fjtesq.com

If indicated below, a copy of the above mentioned filings were also served by mail via United States Postal Service, postage prepaid, to the parties listed below at their last known addresses on 3/1/2021

Kenneth Robbins	9205 W Russell RD STE 240 Las Vegas, NV, 89148