

Date 3/29/24 Page Primary Account XXXXXXXXXXX Enclosures



Mountain River Owners Association PO Box 864 Millsap TX 76066-0864

CHECKING ACCOUNTS

Simply Business 250 Che	cking	Number of Enclosures	5
Account Number	XXXXXXXXXXXX	Statement Dates 3/01/24 thru	3/31/24
Previous Balance	7,788.09	Days in the statement period	31
3 Deposits/Credits	3,116.00	Average Ledger	4,493.60
8 Checks/Debits	7,359.80	Average Collected	4,327.09
Service Charge	.00		
Interest Paid	.00		

3,544.29

Deposits	and Additions		
Date	Description	Amount	
3/08	Deposit	1,023.00	
3/12	Deposit	1,589.00	
3/19	Deposit	504.00	
Checks an	d Withdrawals		
Date	Description	Amount	
3/01	DBT CRD 0628 03/02/24 20000067 CELLGATE	175.91-	
	WWW.CELLGATE.TX		
	Card# 8387		
3/01	PAYMENT Tri-County EC TX	170.94-	
	Mountain River Owners		
3/04	Transfer from x4186 to x5972	5,000.00-	
3/05	Account Analysis Charge	10.00-	
3/12	Bill Payment Check 600009 WESTERN WORLD INSURANCE COMPANY	250.00-	
3/18	DBT CRD 0539 03/19/24 27101485	31.98-	
	INTUIT *QBooks Online		
	CL.INTUIT.COMCA		
	Card# 8387		
3/29	UTILITY CSWR TEXAS UTILI	30.97-	
	2718273		

CHECKS IN NUMBER ORDER

Current Balance

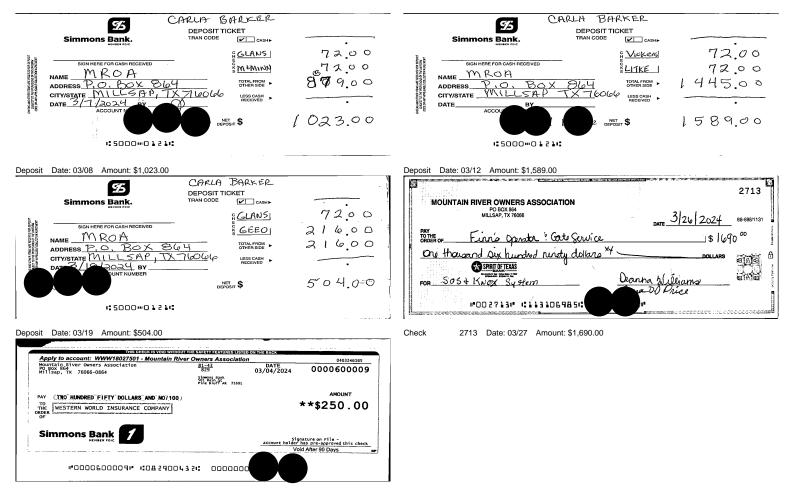
Date Check No Amount Date Check No Amount 250.00 3/27 2713 1,690.00 3/12 600009*

* Denotes skip in sequential check numbers

-			-
Dailv	Balance	Information	

Date	Balance	Date	Balance	Date	Balance
3/01	7,441.24	3/05	2,431.24 3/12	2	4,793.24
3/04	2,441.24	3/08	3,454.24 3/18	5	4,761.26

	Simmons I ember fdic 866.246,240(Date 3/2 Primary A Enclosure	Date 3/29/24 Page Primary Account XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
Simply Busi	ness 250 Checking	j XXXXXXX	XXXXX (Contin	ued)				
Daily Balan	ce Information							
Date	Balance	Date	Balance	Date	Balance			
3/19	5,265.26	3/27	3,575.26 3/	29	3,544.29			
RELATIONSHI	P REWARDS PROGR	AM						
As of 03/25/2024 A Relationship Credit is available for this account when certain conditions are met. Contact your banker or review the terms and conditions of your account to learn more.								



Bill Payment Check 600009 Date: 03/12 Amount: \$250.00

ADDRESS OR NAME CHANGES – You are responsible for notifying us of any change in your address or your name. Unless we agree otherwise, change of address or name must be made in writing by at least one of the account holders. Informing us of your address or name change on a check reorder form is not sufficient. We will attempt to communicate with you only by use of the most recent address you have provided to us. If we receive returned mail, we may impose a service fee.

IF YOUR ADDRESS IS INCORRECT, MARK THROUGH THE ADDRESS SHOWN ON THE FRONT OF THIS STATEMENT. COMPLETE THE FORM AT THE RIGHT, DETACH AND MAIL TO P. O. BOX 7009, PINE BLUFF, AR		PLEASE CHANGE MY ADDRESS TO: STREET						
71603-7009.	CITY			STATE	ZIP CODE			
			EFFECTIVE DAT	Е	SIGNATURE			
PLEASE CHANGE MY ADDRESS ON FOLLOWING ACCOUNTS.	TYPE OF ACCOUNT	CHECKING	SAVINGS	LOAN	CD	ATM / DEBIT CARD	OTHER	
List all accounts you want changed. We will change only the accounts you	ACCOUNT NUMBER							
indicate since some customers prefer to maintain separate account addresses.	ACCOUNT NUMBER							
	AMINE YOUR	STATEMEN	NT PROMPTI	LY AND N	OTIFY US OF	ANY ERRORS	5	
	R	ECONCILEMEN	T INFORMATIO	N				
(1)	Balance now shown	in your checking		\$		These 6 Fast, Ea		
(2)	Add interest shown of	on the statement		Reconcile The Balance Shown On This Statement With The Balance				
(3)	Subtract bank charges included in this statement. (be sure to enter any Bank charges and unrecorded checks in your				Shown In Your Checkbook			
			-					
		NEW BALANCE	SHOWN					
			KBOOK					
(4)		on this statement		\$				
(5)		posits which have been heckbook, but not yet						
				\$				
			SUB-TOTALS	¢				
(6)	List systemating she	alia halami (ahaalia mh		P				
(6)		cks below (checks wh out not yet paid by the			I			
CHECK	AMOUNT	CHECK	AMOUNT					
NUMBER		NUMBER			THESE TW	vo		
					FIGURES SHOULD I	BE		
					THE SAM	E		
						If they are not the sa	· ·	
						figures. If still not th call Customer Service		
						1-866 246 2400 Toll	Free	
		TOTAL	¢					
		TOTAL	\$					
	SUBTRACT THIS		¢					
	OF OUTSTANDING CHECKS FROM SU	JB-TOTAL ABOVE	\$ \$					
			τ					

ELECTRONIC TRANSFER ERROR RESOLUTION NOTICE (CONSUMER ACCOUNTS ONLY)

In case of Errors or Questions about your Electronic Transfer, call us at 1-866-246-2400 or write to us at P. O. Box 7009. Pine Bluff, AR 71611-7009, as soon as you can, if you think your statement or receipt is wrong, or if you need more information about a transfer listed on a statement or a receipt. We must hear from you no later than 60 days after we sent the FIRST statement on which the problem or error appeared .

- (1) Tell us your name and account number (if any).
- (2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
- (3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation.