



ERIN QUIGLEY
 VENTURE PREP
 Account Number :
 xxxx xxxx xxxx 2955



ACCOUNT SUMMARY

Account Number	xxxx xxxx xxxx 2955	Previous Balance	\$2,945.90
Credit Limit	\$5,000.00	Payments	\$7,945.90
Available Credit	\$812.00	Credits	\$0.00
Statement Closing Date	January 13, 2017	Purchases	\$3,379.96
Payment Due Date	February 02, 2017	Other Charges	\$0.00
Amount Past Due	\$0.00	Cash Advances	\$0.00
Min Payment Due	\$0.00	Finance Charges	\$0.00
Days in Billing Cycle	30	New Balance	-\$1,620.04

TOTAL *FINANCE CHARGE* PAID IN 2016 \$0.00

PLEASE DO NOT PAY, AS OF THIS STATEMENT DATE YOUR ACCOUNT HAS A CREDIT BALANCE.

TRANSACTIONS

Trans Date	Post Date	Reference Number	Transaction Description	Amount
12/14	12/15	2443106PD2DYHY3LE	AMAZON.COM AMZN.COM/BILL AMZN.COM/BILL WA	\$89.28
12/14	12/15	2469216PD00182S1G	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$27.64
12/15	12/15	2444500PE8PS27L7L	KING SOOPERS #0693 FUEL DENVER CO	\$35.22
12/16	12/16	2480166PFWGNEXBB2	BANKS SCHOOL SUPPLY INC N NORTHGLENN CO	\$50.14
12/16	12/16	2443106PF2DLASTNE	AMAZON.COM AMZN.COM/BILL AMZN.COM/BILL WA	\$29.95
12/16	12/16	2461043PH231WGEJN	DAVE & BUSTER'S #25 WESTMINSTER CO	\$523.79
12/19	12/19	2444500PKEJ7SHBVE	DOMINO'S 6229 303-366-0596 CO	\$22.64
12/20	12/20	2444500PK8PSZALFT	KING SOOPERS #0693 FUEL DENVER CO	\$38.22
12/20	12/20	7476900PLBJV0S00X	PAYMENT - THANK YOU	-\$2,945.90
12/21	12/21	2469216PL00VFK8ZK	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$10.39
12/22	12/22	2469216PM00XBZJAX	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$19.16
01/05	01/05	24692160500QGWDTB	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$8.99
01/05	01/05	24692160500QGW4GK	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$15.73
01/06	01/06	2449398060D17LGT1	CAROLINA BIOLOGIC SUPPLY 336-586-6301 NC	\$79.05
01/06	01/06	24692160600HRN8QK	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$18.49
01/06	01/06	24692160600KZ4LQR	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$87.32
01/06	01/06	24692160600PTWGGA	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$10.94
01/06	01/06	24692160600090PLM	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$5.50



P O BOX 30833
 SALT LAKE CITY UT 84130-0833

For prompt credit, mail payment to location shown below.
 Payment sent to any other location may delay crediting your account.
 Please detach this portion and return it with your payment to ensure proper credit.

Make Checks Payable to :

BANKCARD CENTER
 PO BOX 30833
 SALT LAKE CTY UT 84130-0833

PAYMENT INFORMATION

Account Number	xxxx xxxx xxxx 2955
Payment Due Date	02/02/17
New Balance	-\$1,620.04
Minimum Payment Due	\$0.00
Past Due Amount	\$0.00
Cash Enclosed	_____

Total Payment Amount

\$

ERIN QUIGLEY
 VENTURE PREP
 2900 RICHARD ALLEN CT
 DENVER CO 80205-4969

ERIN QUIGLEY
 Account Number :
 xxxx xxxx xxxx 2955

TRANSACTIONS (Continued)

Trans Date	Post Date	Reference Number	Transaction Description	Amount
01/06	01/06	246921606002TP32N	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$35.00
01/06	01/06	2471705094M39P8T4	EON OFFICE PRODUCTS DENVER CO	\$276.00
01/07	01/07	24692160700KX050R	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$82.90
01/07	01/07	246921607008T9QZG	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$146.09
01/09	01/09	24226380A2LR2EDDX	SAMSClub #4777 DENVER CO	\$246.39
01/09	01/09	24692160A00PR6BWH	GREASE MONKEY #038 303-320-6810 CO	\$172.69
01/09	01/09	24760620AQ6T2HEAB	WALL WORDS LLC 888-8553152 CA	\$95.66
01/10	01/10	24055230A2DL5Q6DL	WALMART.COM 8009666546 800-966-6546 AR	\$24.24
01/10	01/10	24445000A8PPV4Z7Q	KING SOOPERS #0693 FUEL DENVER CO	\$39.00
01/10	01/10	24492150BLST1F7M2	WRISTBANDCOMWRISTBAND 2812869500 TX	\$160.20
01/11	01/11	24692160B00T3K9DY	VISTAPR*VistaPrint.com 866-8936743 MA	\$248.47
01/12	01/12	24110390QPPYSMJ1E	LAPTOPSCREEN 8556301111 778-340-5658 WA	\$149.73
01/12	01/12	24453880Q000QB4ZB	FP MAILING SOLUTIONS 630-8275773 IL	\$206.50
01/12	01/12	24492150QS17NKMMMS	SCIENCECOMP 800-372-6726 CO	\$32.04
01/12	01/12	24492150QS17XMJK4	PAYPAL *WAZOBIA ENT 402-935-7733 TX	\$295.00
01/12	01/12	24493980Q0D17TGRH	CAROLINA BIOLOGIC SUPPLY 336-586-6301 NC	\$87.61
01/12	01/12	24692160Q00A5Y4KB	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$9.99
01/12	01/12	74769000DBJSYV3MW	PAYMENT - THANK YOU	-\$5,000.00

Finance Charge Summary	Daily Periodic Rate (May Vary)	Total Finance Charge	Balance Subject to Finance Charge	Annual Percentatge Rate
Purchase	0.03492%	\$0.00	\$0.00	12.75%
Cash Advances	0.05407%	\$0.00	\$0.00	19.74%

Questions:

Cardholder Services 1-866-749-7470
 Lost or Stolen 1-866-749-7470

Remit To:

Bankcard Center
 PO Box 30833
 Salt Lake City UT 84130

Or Write:

Bankcard Center
 PO Box 25787
 Salt Lake City UT 84125-0787

Visit us on the web at: www.vectrabank.com

Change of address? Please call 1-866-749-7470 or visit your local branch.

IMPORTANT INFORMATION ABOUT YOUR STATEMENT

**BILLING RIGHTS SUMMARY
(For Consumer Credit Card Accounts Only)**

What to do if you find a mistake on your statement. If you think there is an error on your statement, write to us at:

BankCard Center, Attn: Disputes
P. O. Box 25787
Salt Lake City, UT 84125-0787

In your letter, give us the following information:

- Your name and account number.
- The date and dollar amount of the suspected error.
- A description of what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement. You must notify us of any potential errors in writing. You may call us but if you do, we are not required to investigate any potential errors and you may have to pay the amount in question. While we investigate whether or not there has been an error, we cannot try to collect the amount in question, or report you as delinquent on that amount. The charge in question may remain on your statement and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount. While you do not have to pay the amount in question, you are responsible for the remainder of your balance. We can apply any unpaid amount against your credit limit.

Your Rights If You Are Dissatisfied With Your Credit Card Purchases: If you are dissatisfied with the goods or services that you have purchased with your credit card, and you have tried in good faith to correct the problem with the merchant, you may have the right not to pay the remaining amount due on the purchase. To use this right, all of the following must be true:

- (1) The purchase must have been made in your home state or within 100 miles of your current mailing address, and the purchase price must have been more than \$50. (Note: Neither of these are necessary if your purchase was based on an advertisement we mailed to you, or if we own the company that sold you the goods or services.)
- (2) You must have used your credit card for the purchase. Purchases made with cash advances from an ATM or with a check that accesses your credit card account do not qualify.
- (3) You must not yet have fully paid for the purchase.

If all of the criteria above are met and you are still dissatisfied with the purchase, contact us in writing at the address stated above. While we investigate, the same rules apply to the disputed amount as discussed above. After we finish our investigation, we will tell you our decision. At that point, if we think you owe an amount and you do not pay, we may report you as delinquent.

HOW YOUR INTEREST CHARGES ARE COMPUTED

Periodic Interest Charges: No periodic interest charge on purchases will be assessed if you paid the total New Balance listed on the previous monthly statement in full by the payment due date; otherwise, a periodic interest charge will be assessed on each purchase item from the date of purchase transaction. A periodic interest charge on quasi cash, cash advance and balance transfer transactions will be assessed on each transaction from the date of such transaction and there is no grace period within which such transactions can be repaid without incurring an interest charge.

Periodic Interest Charge Calculations: Interest charges on purchases and interest charges on quasi cash, cash advance and balance transfer transactions are calculated separately and the resulting amounts are then combined to arrive at the total finance charges for the billing period. 1) We first determine the "average daily balance" of your account (including new transactions). To get the "average daily balance", we take the beginning balance of your account each day, add any new transactions and then subtract any payments or credits. This gives us the daily balance (any unpaid interest charges incurred during that billing period are not included in the daily balance). Then, we add up all of the daily balances for the billing period and divide the total by the number of days in the billing period. This gives us the average daily balance, which is also called the "balance subject to interest charge" on your monthly statement. 2) We multiply the balance subject to interest charge by the number of days in the billing period; the resulting number is then multiplied by the daily periodic rate to determine the amount of interest charge.

IMPORTANT INFORMATION ABOUT PAYMENTS

Please allow at least seven (7) days for mailed payments to reach us. Payments in proper form received Monday through Friday (excluding holidays) by 5:00 p.m. local time at the address on the payment coupon will be credited as of that day. There will be a delay in crediting a payment not received at the address on the payment coupon and/or not in proper form.

Proper Form: For a payment to be in proper form you must enclose a valid check or money order drawn on a U.S. bank in U. S. dollars and include your name and the last four digits of your account number on the check or money order. Do not send cash or foreign currency.

NOTIFICATION OF DISPUTED ITEM
Please call 1-888-758-5349 before completing this form.
If your card has been lost or stolen call 1-888-758-5349 immediately.

To notify us of an item you are disputing you can write to us in a separate letter or use this form. Please mail to the following address:

BankCard Center, Attn: Disputes
P. O. Box 25787
Salt Lake City, UT 84125-0787

Do not mail your dispute with your payment.

Name _____	
Signature _____	Date _____
Account # _____	
Reference # _____	Disputed Amount \$ _____
Merchant _____	Date _____

I have examined the transactions on my bill and I'm disputing an item for the following reason(s):

- Neither I nor any person authorized by me to use the card made or received any goods or services represented by the transaction listed above. (If you do not recognize a transaction call 1-888-758-5349 immediately)
- Although I did make a transaction with the merchant (copy of sales slip enclosed), I was billed for # _____ transactions(s) totaling \$ _____ that I did not engage in, nor did anyone else that is authorized to use my card. I have possession of all my cards.
- I haven't received the merchandise that was to have been shipped to me. Expected date of delivery was _____. I contacted the merchant on _____ and the merchant's response was _____

(In order to assist you, the merchant must have been contacted)

- I returned or cancelled (circle one) merchandise on _____ because _____

(Attach copy of refund and/or return receipt)

- The attached credit slip was posted as a charge on my statement.
- I was issued a credit slip for \$ _____ on _____ that has not posted on my statement. (Attach a copy of the credit slip)
- Merchandise shipped to me arrived damaged and/or defective on _____. I returned it on _____. Merchant response was _____

(Attach a copy of the postal receipt and/or credit slip)

- The sales receipt amount was increased from \$ _____ to \$ _____ and/or was added incorrectly. (Attach a copy of the receipt that supports the correct amount).
- I paid the \$ _____ transaction that posted on _____ with another form of payment, the merchant is _____ (Attach copies of any supporting proof of another form of payment)
- I made a single transaction with _____ for \$ _____ on _____ but not the transaction for \$ _____ that posted to my statement on _____.
- Other - Attach a letter describing what you are disputing and copies of any supporting documents.

If you use the original form above please make a copy of the billing statement on the reverse side and any other documents for your records.