

Account Number : 4246 0446 7410 3076
 Unique ID: XXXX XXXX XXXX 0461
 Christina Lee
 Statement Date : 11-24-2025



Account Summary		General Information	
Previous Balance	\$0.00	Total Activity	\$1,063.03
Purchases and Other Charges	\$1,063.03	QUESTIONS OR TO REPORT A LOST OR STOLEN CARD, CALL CUSTOMER SERVICE 1-800-344-5696	
Cash Advances	\$0.00		
Cash Advance Fees	\$0.00		
Late Payment Charges	\$0.00		
Credits	\$0.00 CR		
Payments	\$0.00 PY		
Total Activity	\$1,063.03		
Disputed Amount	\$0.00		

New Activity

Post Date	Tran Date	Reference Number	Transaction Description	Amount
10-24	10-23	24733095296089874010150	MONDAY.COM WWW.URL.COM NY	524.03
10-27	10-26	24906415299241751916862	CCI*CONSTANT-CONTACT 855-2295506 MA	519.00
11-04	11-04	24492165308100007820221	OPENAI *CHATGPT SUBSCR OPENAI.COM CA	20.00

CORPORATE PAYMENT SYSTEMS
 P.O. BOX 6343
 FARGO, ND 58125-6343

Account Number: 4246 0446 7410 3076
 Unique ID: XXXX XXXX XXXX 0461
 Amount Due: \$0.00

****MEMO STATEMENT ONLY****

In order to meet audit standards, please submit the approved/signed Cal Card statement and original receipts to the Accounts Payable inbox in Building 600.

Cardholder: _____ Supervisor: _____
 Budget Manager: _____ Vice President: _____
(Matching full ORG code) (Matching 1st digit of ORG code)
Below signatures are required if more than one ORG code is being used.
 Budget Manager: _____ Vice President: _____
(Matching full ORG code) (Matching 1st digit of ORG code)

