



UMPQUA BANK

ANICA WALLS
SEIU LOCAL 1000
Account Number: ####-####-####-5548
Page 1 of 2



Account Summary

Credit Limit \$5,000.00
Billing Cycle 08/31/2021
Days In Billing Cycle 32
Purchases and Other Charges + \$359.27
Cash + \$0.00
Balance Transfer + \$0.00
Credits - \$0.00
Payments - \$0.00

TOTAL ACTIVITY \$359.27

Account Inquiries

Call us at: (866) 777-9013
Lost or Stolen Card: (866) 839-3485
Go to www.umpquabank.com
Write us at PO BOX 1952, SPOKANE, WA 99210-1952

Cardholder Account Summary

Trans Date	Post Date	Reference Number	Description	Amount
08/01	08/01	24692161213100038930859	STARBUCKS 800-782-7282 800-782-7282 WA	20.00
07/30	08/01	24692161211100038302440	STARBUCKS 800-782-7282 800-782-7282 WA	20.00
08/03	08/05	24316051216548257028647	SHELL OIL 10008205006 SACRAMENTO CA	60.00
08/04	08/05	24692161216100910638643	STARBUCKS 800-782-7282 800-782-7282 WA	15.00
08/12	08/13	24055231224400929000039	MAYA TRADITIONAL MEXICAN SACRAMENTO CA	13.65
08/12	08/15	24765011225010000147843	CRAZY SUSHI. ELK GROVE CA	68.10
08/19	08/20	24692161231100311525754	STARBUCKS 800-782-7282 800-782-7282 WA	20.00
08/25	08/25	24431061237083720071531	CHIPOTLE ONLINE 180-024-4768 CA	14.83
08/26	08/27	24692161238100939783945	STARBUCKS 800-782-7282 800-782-7282 WA	15.00
08/27	08/27	24011341239000012869440	DOORDASH*MENDOCINO FAR WWW.DOORDASH. CA	27.04
08/27	08/29	24692161239100854985631	STARBUCKS 800-782-7282 800-782-7282 WA	15.00
08/29	08/30	24692161241100519646053	STARBUCKS 800-782-7282 800-782-7282 WA	10.00
08/29	08/30	24493981242400753000384	ADALBERTACO'S MEXICAN FO SACRAMENTO CA	39.70
08/31	08/31	24011341243000010141291	DOORDASH*MENDOCINO FAR WWW.DOORDASH. CA	20.95

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

UMPQUA BANK
PO BOX 1952
SPOKANE WA 99210-1952



Account Number

####-####-####-5548

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date

08/31/21

Total Activity

\$0.00

Memo Statement No Payment Required

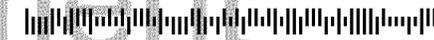
\$



ANICA WALLS
SEIU LOCAL 1000
1808 14TH STREET
ATTN STEVE SCHMIDT
SACRAMENTO CA 95811

e-Statement

MAKE CHECK PAYABLE TO:



UMPQUA BANK
PO BOX 2310
SPOKANE WA 99210-2310



IMPORTANT INFORMATION

Finance Charge Calculation Methods and Computation of Average Daily Balance Subject to Finance Charge: The Finance Charge Calculation Method applicable to your account for Cash Advances and Credit Purchases of goods and services that you obtain through the use of your card is specified on the front side of this statement and explained below:

Method A - Average Daily Balance (including current transactions): The Finance Charge on purchases begins on the date the transaction posted to your account. The Finance Charge on Cash Advances begins on the date you obtained the cash advance, or the first day of the billing cycle within which it is posted to your account, whichever is later. There is no grace period.

The Finance Charges for a billing cycle are computed by applying the Periodic Rate to the "average daily balance" of your account. To get the average daily balance, we take the beginning balance of your account each day, add any new purchases or cash advances, and subtract any payments, credits, non-accruing fees, and unpaid finance charges. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle.

Method E - Average Daily Balance (excluding current transactions): To avoid incurring an additional Finance Charge on the balance of purchases (and cash advances if Method E is specified as applicable to cash advances) reflected on your monthly statement, you must pay the New Balance shown on your monthly statement on or before the Payment Due Date. The grace period for the New Balance of purchases extends to the Payment Due Date.

The Finance Charges for a billing cycle are computed by applying the Periodic Rate to the "average daily balance" of purchases (and if applicable, cash advances). To get the average daily balance, we take the beginning balance of your account each day and subtract any payments, credits, non-accruing fees, and unpaid finance charges. We do not add in any new purchases or cash advances. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle.

Method G - Average Daily Balance (including current transactions): To avoid incurring an additional Finance Charge on the balance of purchases (and cash advances, if Method G is specified as applicable to cash advances) reflected on your monthly statement and, on any new purchases (and if applicable, cash advances) appearing on your next monthly statement, you must pay the New Balance, shown on your monthly statement, on or before the Payment Due Date. The grace period for the New Balance of purchases extends to the Payment Due Date.

The Finance Charges for a billing cycle are computed by applying the Periodic Rate to the "average daily balance" of purchases (and if applicable, cash advances). To get the average daily balance, we take the beginning balance of your account each day, add any new purchases or cash advances, and subtract any payments, credits, non-accruing fees, and unpaid finance charges. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle.

Payment Crediting and Credit Balance: Payments received at the location specified on the front of the statement after the phrase "MAKE CHECK PAYABLE TO" will be credited to the account specified on the payment coupon as of the date of receipt. Payments received at a different location or payments that do not conform to the requirements set forth on or with the periodic statement (e.g. missing payment stub, payment envelope other than as provided with your statement, multiple checks or multiple coupons in the same envelope) may be subject to delay in crediting, but shall be credited within five days of receipt. If there is a credit balance due on your account, you may request in writing, a full refund. Submit your request to the Account Inquiries address on the front of this statement.

By sending your check, you are authorizing the use of the information on your check to make a one-time electronic debit from the account on which the check is drawn. This electronic debit, which may be posted to your account as early as the date your check is received, will be only for the amount of your check. The original check will be destroyed and we will retain the image in our records. If you have questions please call the customer service number on the front of this billing statement.

Closing Date: The closing date is the last day of the billing cycle; all transactions received after the closing date will appear on your next statement.

Annual Fee: If your account has been assessed an annual fee, you may avoid paying this annual fee by sending written notification of termination within 30 days following the mailing date of this bill. Submit your request to the Account Inquiries address on the front of this statement. You may use your card(s) during this 30 day period but immediately thereafter must send your card(s), which you have cut in half, to this same address.

Negative Credit Reports: You are hereby notified that a negative credit report reflecting on your credit record may be submitted to a credit reporting agency if you fail to fulfill the terms of your credit obligations.

BILLING RIGHTS SUMMARY

In Case of Errors or Inquiries About Your Bill: If you suspect there is an error on your account or you need information about a transaction on your bill, send your written inquiry to the Account Inquiries address on the front of this statement within 60 days of the date of the statement containing the transaction in question. You may telephone us, however a written request is required to preserve your rights.

In your letter, give us the following information:

- Your name and account number.
The dollar amount of the suspected error.
Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

Please provide a legal document evidencing your name change, such as a court document.

Please use blue or black ink to complete form

NAME CHANGE

Last [grid]

First [grid] Middle [grid]

ADDRESS CHANGE

Street [grid]

[grid]

[grid]

City [grid] State [grid] ZIP Code [grid]

Home Phone ([grid]) [grid] - [grid] Business Phone ([grid]) [grid] - [grid]

Cell Phone ([grid]) [grid] - [grid] E-mail Address _____

SIGNATURE REQUIRED TO AUTHORIZE CHANGES

Signature _____