Rental Application for **685 First Ave**

Notice: All adult applicants (18 years or older) must complete a separate application for rental.

APPLICANT INFORMATION

LAST NAME	FIRST NAME	M.I.	SUFFIX
Vicente	Emily	R.	

SSN	BIRTH DATE	PHONE - TYPE
-**-*	5/24/1995	(973) 432 - 0023 - Mobile

EMAIL
emilyraevicente@gmail.com

EMERGENCY CONTACT

NAME	ADDRESS
Barbara Komor	134 Elbert St, Ramsey, 37 07446

PHONE	EMAIL ADDRESS	RELATIONSHIP
(201) 315 - 0881	emilyraevicente@gmail.com	mother

CURRENT ADDRESS

STREET ADDRESS	CITY	STATE	ZIP
134 Elbert Street	Ramsey	NJ	07446

DATE IN	DATE OUT	MONTHLY RENT
	current	$0.00 / Mo.

EMPLOYMENT & INCOME INFORMATION

OCCUPATION	EMPLOYER/COMPANY
Assistant	SPH Trading, LLC

SUPERVISOR	SUPERVISOR PHONE	SALARY	START DATE
Stephen Hanson	(917) 971 - 4236	$45,000.00/Yr.	

EMPLOYER ADDRESS	CITY	STATE	ZIP
2109 Broadway 1518	New York	NY	10023

OCCUPATION	EMPLOYER/COMPANY
Registered Nurse	New York Presbyterian Weill Cornell

SUPERVISOR	SUPERVISOR PHONE	SALARY	START DATE
Nancy Damiani-Ferrante	(347) 443 - 2214	$131,560.00/Yr.	

EMPLOYER ADDRESS	CITY	STATE	ZIP
525 East 68th Street	New York	NY	10065

BACKGROUND INFORMATION

Have you ever filed for bankruptcy?	Have you ever willfully refused to pay rent when due?
NO	NO

Have you ever been evicted from a tenancy or left owing money?	Have you ever been convicted of a crime?
NO	NO

Preferred Mailing Address:
134 Elbert Street, Ramsey, NJ 07446 - US

NEW YORK CITY TENANT FAIR CHANCE ACT

Pursuant to the laws of the federal government, New York State, and NYC Admin. Code § 20-807 et seq., we are required to provide you with the following disclosure:

1) The application information you provide will be used by this community's owner or designated agent (the "Owner") to obtain a tenant screening report on you, and the Owner may use this report to determine your suitability for housing.

2) If your application is denied or other adverse action is taken against you on the basis of information contained in the tenant screening report, the Owner must tell you that such action was taken and provide you with the contact information of the screening company that provided the tenant screening report.

3) You may obtain a free copy of the report and dispute inaccurate or incorrect information on the report directly with the screening company at: Attn: On-Site c/o RealPage, 2201 Lakeside Boulevard, Richardson, TX 75082; 1-877-222-0384; www.on-site.com/renter-relations/.

4) You are entitled to one free tenant screening report from each national consumer reporting agency annually, in addition to a credit report which can be obtained from www.annualcreditreport.com.

APPLICATION CONSENT

I hereby warrant that all statements set forth above are true.

I understand that a consumer report and/or an investigative consumer report may be requested in connection with my prospective or continuing housing or guarantor application with **685 First Ave** through RP On-Site LLC (On-Site). I understand that these reports may include information concerning my character, employment and income verification, general reputation, personal characteristics, public records information, criminal records information, education, qualifications, motor vehicle record, mode of living, credit and indebtedness information, and any other information which may reflect upon my potential for tenancy or guarantor status gathered from any individual, organization, entity, agency, or other source which may have knowledge concerning any such items of information.

I understand that **685 First Ave** may require income and employment verification in connection with my application. I further understand that income and employment verification require access to my employment, income, and payroll related information. I authorize and consent to the access to, use, and release of such information by On-Site, Trans Union LLC, and other applicable credit bureaus for the purpose of providing the verification services in relation to my application and during the course of any ongoing lease obligation arising from such application.

I understand that if an investigative consumer report is requested about me, I have the right to make a written request to **685 First Ave**, within a reasonable period of time, for complete and accurate disclosure of the nature and scope of the investigation requested.

I consent to the delivery of all notices or disclosures required by law via any medium so chosen by **685 First Ave** or On-Site, including but not limited to email or other electronic transmission. I understand that all notices shall be deemed received upon being sent.

By submitting this application, I certify that I have read and fully understand the disclosures and my rights detailed above and authorize On-Site to obtain, for the purpose of determining my eligibility for initial or continued tenancy or guarantor status, a consumer report and/or investigative consumer report and to disclose all information obtained by On-Site to **685 First Ave**, its affiliates, and assigns now and in the future. I also certify that I have read and fully understand my rights under the FCRA available at https://www.on-site.com/resources/consent/fcraDisclosuresConsent.pdf.

I understand that, upon written request, I will be informed whether or not a consumer report or an investigative consumer report was requested and, if such a report was requested, informed of the name and address of the credit reporting agency that furnished the report. With regard to "investigative consumer reports", I further understand that when I receive the name and address of the consumer reporting agency, I may request a copy of such report by contacting such agency. I acknowledge that I have received and read Article 23-A of the New York Correction Law (https://www.on-site.com/resources/consent/correctionLawArticle23a.pdf)

☒ *Application consent was digitally accepted by Emily R. Vicente*

Signed by Emily R. Vicente
Fri Oct 25 2024 08:10:32 PM EDT
Key: 8C658AC2; IP Address: 74.102.198.3

Emily R. Vicente *(Applicant)* *Date*

The following charge(s) will appear on your card statement as *"ClickPay"*

Application Fee - Charge Details

Name on Card	Account Number	Reference Number	Authorized
Emily Vicente	XXXXXXXXXXXX6453	15195962	$21.50

This card has been authorized for the amount above and will be charged when the application is processed.

California Required Notices

This report does not guarantee the accuracy or truthfulness of the information as to the subject of the investigation, but only that it is accurately copied from public records, and information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of the report.

An investigative consumer reporting agency shall provide a consumer seeking to obtain a copy of a report or making a request to review a file, a written notice in simple, plain English and Spanish setting forth the terms and conditions of his or her right to receive all disclosures, as provided in CA Civil Code Section 1786.26.

This report was prepared using software provided by RP On-Site LLC, which can be contacted at: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or https://www.on-site.com/request-rental-report-or-submit-dispute/.

Avisos obligatorios en el estado de California

El presente informe no garantiza la exactitud ni la veracidad de la información con respecto al tema de investigación, sino únicamente que es una copia exacta de los registros públicos y es posible que la información generada como consecuencia del robo de identidad, incluidos los registros de antecedentes delictivos, se haya asociado por error con el consumidor objeto del presente informe.

Una agencia de investigación de verificación de crédito proporcionará al consumidor que desee obtener una copia de un informe o que solicite la revisión de un archivo un aviso por escrito en inglés y español, escrito en un lenguaje simple y claro, que establezca los términos y condiciones de su derecho a recibir todas las divulgaciones conforme a la Sección 1786.26 del Código Civil de California.

Este informe se preparo con el software proporcionado pro RP On-Site LLC, que puede contractarse en: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or https://www.on-site.com/request-rental-report-or-submit-dispute/.

Rental Report for Emily R. Vicente

The property's screening criteria result	
PENDING	There is screening pending and no overall recommendation yet. Any scores are preliminary, and do not necessarily reflect the final recommendation.

Score for Emily R. Vicente: 705			
		Importance	**Result**
AI Score		Pass/Fail	👍
No Credit		Pass/Conditional	👍
Total annual income to rent ratio exceeds 40.0		Pass/Fail	PENDING
May have been through a bankruptcy		Pass/Fail	👍
No unpaid rental collections		Pass/Fail	👍
Criminal and Other Public Records: Felony Convictions		Pass/Fail	👍
Total Considered Felony Convictions	None	Pass/Fail	👍
Alcohol	None ever	Pass/Fail	👍
Bad Check	None ever	Pass/Fail	👍
Criminal Other	None ever	Pass/Fail	👍
Drug Manufacture Distribution	None ever	Pass/Fail	👍
Drug Marijuana Use	None ever	Pass/Fail	👍
Drug Meth Manufacture	None ever	Pass/Fail	👍
Drug Use	None ever	Pass/Fail	👍
Fraud	None ever	Pass/Fail	👍
Government Obstruction	None ever	Pass/Fail	👍

Kidnapping	None ever	Pass/Fail	👍
Property Destruction	None ever	Pass/Fail	👍
Property Other	None ever	Pass/Fail	👍
Property Theft	None ever	Pass/Fail	👍
Prostitution	None ever	Pass/Fail	👍
Sex Offense Coerced	None ever	Pass/Fail	👍
Sex Offense Willful	None ever	Pass/Fail	👍
Society Other	None ever	Pass/Fail	👍
Violent Fatal	None ever	Pass/Fail	👍
Violent Non Fatal	None ever	Pass/Fail	👍
Weapons	None ever	Pass/Fail	👍
Wildlife	None ever	Pass/Fail	👍
Criminal and Other Public Records: Misdemeanor Convictions		Pass/Fail	👍
Total Considered Misdemeanor Convictions	None	Pass/Fail	👍
Bad Check	None ever	Pass/Fail	👍
Criminal Other	None ever	Pass/Fail	👍
Fraud	None ever	Pass/Fail	👍
Government Obstruction	None ever	Pass/Fail	👍
Kidnapping	None ever	Pass/Fail	👍
Property Destruction	None ever	Pass/Fail	👍
Property Other	None ever	Pass/Fail	👍
Property Theft	None ever	Pass/Fail	👍
Prostitution	None ever	Pass/Fail	👍
Sex Offense Coerced	None ever	Pass/Fail	👍
Sex Offense Willful	None ever	Pass/Fail	👍
Society Other	None ever	Pass/Fail	👍
Violent Fatal	None ever	Pass/Fail	👍
Violent Non Fatal	None ever	Pass/Fail	👍
Weapons	None ever	Pass/Fail	👍
Alcohol	-	Not Considered	N/A
Drug Manufacture Distribution	-	Not Considered	N/A
Drug Marijuana Use	-	Not Considered	N/A
Drug Meth Manufacture	-	Not Considered	N/A
Drug Use	-	Not Considered	N/A
Wildlife	-	Not Considered	N/A
Is not a registered sex offender		Pass/Fail	👍

Credit Quick Summary	
Total annual income (reported by Applicant)	$176,560.00
Total **verified** annual income	Pending
Total **verified** combined annual income to rent ratio	Pending (based on rent of $4,100.00)
Total number of accounts	12
Accounts with no late payments	12 (0 unpaid past due)
Accounts paid 30-59 days past due	0 (0 unpaid past due)
Accounts paid 60-89 days past due	0 (0 unpaid past due)
Accounts paid more than 90 days past due	0 (0 unpaid past due)
Total outstanding balance	$36,256.00 ($0.00 past due)
Outstanding revolving debt	$10,534.00 (8% of limit) ($0.00 past due)
Outstanding loan balance	$25,722.00 ($0.00 past due)
Bankruptcies, foreclosures, and legal items	0
Collection total balance (includes past due)	$0.00
Rental History records found	0

Identity	From Application	From Equifax
Name:	Emily R. Vicente	EMILY VICENTE
SSN:	***-**-****	***-**-****
Birth Date:	5/**/1995	5/**/1995

Addresses	From Application	From Equifax
	134 Elbert Street Ramsey, NJ 07446 - US	107 SURREY CT. RAMSEY, NJ 07446 (Applicant) Reported 10/2024

Employment	From Application	From Equifax
Applicant:	Assistant SPH Trading, LLC $45,000.00/Yr. Registered Nurse New York Presbyterian Weill Cornell $131,560.00/Yr. Total annual Income: $176,560.00	

Criminal and Other Public Records				
Requested For Emily R. Vicente	**Location Searched** Multistate Search	**Period Searched** 10/26/2017 - 10/26/2024	**Requested** 10/26/2024	**Returned** 10/26/2024
Results *No Records Found*				

National Sex Offender Registry History		
Requested For Emily R. Vicente	**Date Requested** 10/26/2024	**Date Returned** 10/26/2024
Results *No Records Found*		

Restricted Person Search		
Requested For Emily R. Vicente	**Requested** 10/26/2024	**Returned** 10/26/2024
Results *No Records Found*		

Risk Models

From RealPage

Risk Model Name	Score	Score Factors
RealPage AI Score (Applicant)	705	Tradeline scoring Debt-to-income ratio Credit Score Rental Payment History

Description

RealPage AI Score uses machine-learning and data patterns in credit score, debt/liability types, trade lines, rental payment history, and renter behavior to achieve reduced bad debt. The RealPage AI Score range is between 1 and 1000 (the higher the score, the less risky the consumer).

From Equifax

Risk Model Name	Score	Score Factors
Credit Score (Applicant)	680	The date that you opened your oldest account is too recent The balances on your accounts are too high compared to loan amounts Lack of sufficient relevant real estate account information The total of all balances on your open accounts is too high

Description

This credit score is a widely used risk model that uses credit report data to predict the likelihood of default. The credit score range is between 300 and 850 (the higher the score, the less risky the consumer).

Credit Accounts

From Equifax

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
APPLE CARD - GS BANK (Applicant)	12/2019	8/2024					$10,534.00

Monthly Payment	High Credit	Type	Comments
$330.00	$11,498.00	REVOLVING	CONSUMER DISPUTES AFTER RESOLUTION Rate/Status 1: Pays account as agreed

Payment History

9/24	7/24	5/24	3/24	1/24	11/23	9/23	7/23	5/23	3/23	1/23	11/22
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
ED FINANCIAL/ESA (Applicant)	9/2023	8/2024				$0.00	$7,344.00

Monthly Payment	High Credit	Type	Comments
	$7,000.00	INSTALLMENT	STUDENT LOAN - PAYMENT DEFERRED FIXED RATE Rate/Status 1: Pays account as agreed

Payment History

9/24	7/24	5/24	3/24	1/24	11/23
0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
ED FINANCIAL/ESA (Applicant)	9/2023	8/2024				$0.00	$5,500.00

Monthly Payment	High Credit	Type	Comments
	$5,500.00	INSTALLMENT	STUDENT LOAN - PAYMENT DEFERRED FIXED RATE Rate/Status 1: Pays account as agreed

Payment History

9/24	7/24	5/24	3/24	1/24	11/23
0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
ED FINANCIAL/ESA (Applicant)	5/2023	8/2024				$0.00	$3,689.00
Monthly Payment	**High Credit**	**Type**	**Comments**				
	$3,500.00	INSTALLMENT	STUDENT LOAN - PAYMENT DEFERRED FIXED RATE Rate/Status 1: Pays account as agreed				

Payment History

9/24	7/24	5/24	3/24	1/24	11/23	9/23	7/23
0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
ED FINANCIAL/ESA (Applicant)	1/2023	8/2024				$0.00	$3,689.00
Monthly Payment	**High Credit**	**Type**	**Comments**				
	$3,500.00	INSTALLMENT	STUDENT LOAN - PAYMENT DEFERRED FIXED RATE Rate/Status 1: Pays account as agreed				

Payment History

9/24	7/24	5/24	3/24	1/24	11/23	9/23	7/23	5/23	3/23
0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
ED FINANCIAL/ESA (Applicant)	5/2023	8/2024				$0.00	$2,750.00
Monthly Payment	**High Credit**	**Type**	**Comments**				
	$2,750.00	INSTALLMENT	STUDENT LOAN - PAYMENT DEFERRED FIXED RATE Rate/Status 1: Pays account as agreed				

Payment History

9/24	7/24	5/24	3/24	1/24	11/23	9/23	7/23
0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
ED FINANCIAL/ESA (Applicant)	1/2023	8/2024				$0.00	$2,750.00
Monthly Payment	**High Credit**	**Type**	**Comments**				
	$2,750.00	INSTALLMENT	STUDENT LOAN - PAYMENT DEFERRED FIXED RATE Rate/Status 1: Pays account as agreed				

Payment History

9/24	7/24	5/24	3/24	1/24	11/23	9/23	7/23	5/23	3/23
0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
BANK OF AMERICA (Applicant)	7/2017	11/2020					$0.00
Monthly Payment	**High Credit**	**Type**	**Comments**				
	$33,216.00	INSTALLMENT	Rate/Status 1: Pays account as agreed				

Payment History

12/20	10/20	8/20	6/20	4/20	2/20	12/19	10/19	8/19	6/19	4/19	2/19
0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
DISCOVER STUDENT LOA (Applicant)	8/2023	3/2024					$0.00
Monthly Payment	**High Credit**	**Type**	**Comments**				
	$22,160.00	INSTALLMENT	Rate/Status 1: Pays account as agreed				

Payment History

5/24	3/24	1/24	11/23	9/23
0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
DISCOVER STUDENT LOA (Applicant)	11/2022	3/2024					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$22,000.00	INSTALLMENT	Rate/Status 1: Pays account as agreed			

Payment History

5/24	3/24	1/24	11/23	9/23	7/23	5/23	3/23	1/23
0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
DISCOVER STUDENT LOA (Applicant)	5/2023	3/2024					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$19,350.00	INSTALLMENT	Rate/Status 1: Pays account as agreed			

Payment History

5/24	3/24	1/24	11/23	9/23	7/23
0 0 0 0 0 0 0 0 0 0 0 0					

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
CAPITAL ONE BANK USA (Applicant)	11/2017	12/2019					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$766.00	REVOLVING	ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed			

Payment History

2/20	12/19	10/19	8/19	6/19	4/19	2/19	12/18	10/18	8/18	6/18	4/18
0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0											

Previous Credit Inquiries	
From Equifax	
5/2023	DISCOVER FINANCIAL S (Applicant)

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address form the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

  CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

  You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

  As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

  A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over $10 billion and their affiliates b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552 b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act. c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357

A Summary of Your Additional Rights in New York

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer credit reporting agency from releasing information in your credit report without your express authorization. A security freeze must be requested in writing by certified or overnight mail. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent.

To place a security freeze on your credit report, you must contact each of these credit reporting agencies:

Equifax Security Freeze
P.O. Box 105788
Atlanta, GA 30348
(800) 685-1111
https://www.freeze.equifax.com

Experian Security Freeze
P.O. Box 9554
Allen, TX 75013
(888) 397-3742
https://www.experian.com/freeze/center.html

TransUnion LLC
P.O. Box 2000
Chester, PA 19022-2000
(888) 909-8872
www.transunion.com/personal-credit/credit-disputes/credit-freezes.page

However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit mortgage, government services or payments, insurance, rental housing, employment, investment, license, cellular phone, utilities, digital signature, Internet credit card transaction, or other services, including an extension of credit at point of sale. When you place a security freeze on your credit report, you will be provided a personal identification number or password to use if you choose to remove the freeze on your credit report or authorize the release of your credit report to a specific party or for a period of time after the freeze is in place. To provide that authorization you must contact the consumer credit reporting agency and provide all of the following:

1. The personal identification number or password;
2. Proper identification to verify your identity;
3. The proper information regarding the party or parties who are to receive the credit report or the period of time for which the report shall be available to users of the credit report; and
4. Payment of any applicable fee.

A consumer reporting agency must authorize the release of your credit report no later than three business days after receiving the above information.

A security freeze does not apply to circumstances in which you have an existing account relationship and a copy of your report is requested by your existing creditor or its agents or affiliates for certain types of account review, collection, fraud control or similar activities.

If you are actively seeking credit, you should understand that the procedures involved in lifting a security freeze may slow your application for credit. You should plan ahead and lift a freeze, either completely if you are shopping around, or specifically for a certain creditor, before applying for new credit.

Additional rights under your state's law, which are also in the federal Fair Credit Reporting Act, are explained in the enclosed Summary of Your Rights under the Fair Credit Reporting Act.

NEW JERSEY NJMVC

New Jersey Motor Vehicle Commission

AUTO DRIVER LICENSE

NOT FOR "REAL ID" PURPOSES

Acting Chief Administrator

DL V4075 22479 55952 CLASS D

DOB 05-24-1995

ISS 05-09-2024 EXP 05-24-2028

VICENTE
EMILY RAE
134 ELBERT ST
RAMSEY, NJ 07446-1406

END NONE
RESTR 1

GENDER F HGT 5'-04" EYES BRN ORGAN DONOR
VA OK202413000000017 RENC 24.00

Form **1040** Department of the Treasury—Internal Revenue Service **U.S. Individual Income Tax Return** **2023** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 20_____ See separate instructions.

Your first name and middle initial	Last name	Your social security number
Emily R	Vicente	145 98 4445
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.
134 Elbert St

City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code
Ramsey NJ 074461406

Foreign country name | Foreign province/state/county | Foreign postal code

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Filing Status Check only one box.
☒ Single ☐ Head of household (HOH)
☐ Married filing jointly (even if only one had income)
☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1959 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1959 ☐ Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here . . ☐

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit	Credit for other dependents
			☐	☐
			☐	☐
			☐	☐
			☐	☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.
If you did not get a Form W-2, see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)				1a	46,012.
b	Household employee wages not reported on Form(s) W-2				1b	
c	Tip income not reported on line 1a (see instructions)				1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)				1d	
e	Taxable dependent care benefits from Form 2441, line 26				1e	
f	Employer-provided adoption benefits from Form 8839, line 29				1f	
g	Wages from Form 8919, line 6				1g	
h	Other earned income (see instructions)				1h	0.
i	Nontaxable combat pay election (see instructions)	1i				
z	Add lines 1a through 1h				1z	46,012.

Attach Sch. B if required.

2a	Tax-exempt interest	2a		b Taxable interest	2b	
3a	Qualified dividends	3a		b Ordinary dividends	3b	
4a	IRA distributions	4a		b Taxable amount	4b	
5a	Pensions and annuities	5a		b Taxable amount	5b	
6a	Social security benefits	6a		b Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions) ☐					
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐				7	
8	Additional income from Schedule 1, line 10				8	1,800.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**				9	47,812.
10	Adjustments to income from Schedule 1, line 26				10	2,627.
11	Subtract line 10 from line 9. This is your **adjusted gross income**				11	45,185.
12	**Standard deduction or itemized deductions** (from Schedule A)				12	13,850.
13	Qualified business income deduction from Form 8995 or Form 8995-A				13	335.
14	Add lines 12 and 13				14	14,185.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**				15	31,000.

Standard Deduction for—
- Single or Married filing separately, $13,850
- Married filing jointly or Qualifying surviving spouse, $27,700
- Head of household, $20,800
- If you checked any box under *Standard Deduction*, see instructions.

Tax and Credits	16	**Tax** (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	3,503.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	3,503.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	2,000.
	21	Add lines 19 and 20	21	2,000.
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	1,503.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	254.
	24	Add lines 22 and 23. This is your **total tax**	24	1,757.
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2 — 25a: 5,550.		
	b	Form(s) 1099 — 25b:		
	c	Other forms (see instructions) — 25c:		
	d	Add lines 25a through 25c	25d	5,550.
If you have a qualifying child, attach Sch. EIC.	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC) No — 27:		
	28	Additional child tax credit from Schedule 8812 — 28:		
	29	American opportunity credit from Form 8863, line 8 — 29:		
	30	Reserved for future use — 30:		
	31	Amount from Schedule 3, line 15 — 31:		
	32	Add lines 27, 28, 29, and 31. These are your **total other payments and refundable credits**	32	
	33	Add lines 25d, 26, and 32. These are your **total payments**	33	5,550.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**	34	3,793.
	35a	Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here ☐	35a	3,793.
Direct deposit? See instructions.	b	Routing number 221271935 — c Type: ☒ Checking ☐ Savings		
	d	Account number 460875 5		
	36	Amount of line 34 you want **applied to your 2024 estimated tax** — 36:		
Amount You Owe	37	Subtract line 33 from line 24. This is the **amount you owe**. For details on how to pay, go to *www.irs.gov/Payments* or see instructions	37	
	38	Estimated tax penalty (see instructions) — 38:		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☐ **Yes.** Complete below. ☒ **No**

Designee's name	Phone no.	Personal identification number (PIN)

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		Assistant, Student	
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Joint return? See instructions. Keep a copy for your records.

Phone no. (973)432-0023 Email address

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed

Firm's name Self-Prepared Phone no.

Firm's address Firm's EIN

October 21, 2024

SPH Trading, LLC

2109 Broadway 1518

New York, NY 10023

To Whom It May Concern,

Please accept this letter as verification of Emily Vicente's employment with the SPH Trading, LLC.

Employee Name: *Emily Vicente*

Employment Dates: *August 24, 2020 – Present*

Current Job Title: *Assistant*

Current Salary: *$45,000/year*

If you have any questions or need any additional information, please feel free to contact me at shanson900@gmail.com.

Sincerely,

Stephen Hanson

Owner

SPH Trading, LLC

NewYork-Presbyterian

10/18/2024

Dear Emily,

Welcome to NewYork-Presbyterian (NYP) NYP/Weill Cornell Medical Center!

NYP/Weill Cornell Medical Center is pleased to offer you employment as a Staff Nurse - Cardiac Medicine Telemetry SDU-Full time Nights in the Critical Care-Med Team department. You are tentatively scheduled to join us on 11/18/2024.

You will earn the following rate(s) of pay that are payable biweekly and subject to the customary and usual payroll deductions.

Base Hourly Pay: $62.5880
Educational Differential: $0.6667

Total Hourly Rate of Pay: $63.2547

NYP/Weill Cornell Medical Center benefit program will be fully explained during the hospital's General Employee Orientation, a mandatory program for all employees. Your benefit selections will be effective on your first day of employment.

This offer is contingent upon successful completion of NYP/Weill Cornell Medical Center pre-employment requirements, which may include but are not limited to: clearance from Workforce Health and Safety, criminal background screening and license verification. Due to the ongoing situation with COVID-19, some of these clearances may be completed after your hire date.

Please be advised that neither this letter, nor its contents, are intended nor shall be deemed to constitute a contract of employment.

We are pleased that you are joining NYP and will support NYP's mission to "put patients first," by providing the highest quality of care in a supportive and compassionate environment.

Amazing things are happening here because NYP's employees make it possible!

Congratulations and best wishes,

Nancy Damiani-Ferrante, RN
Talent Acquisition Recruiter
Talent Acquisition/Human Resources
NewYork-Presbyterian

Oct 18, 2024 10:02 AM

Notice and Acknowledgement of Pay Rate and Payday Under Section 195.1 of the New York State Labor Law

---

Employer

Company Name: NewYork-Presbyterian Hospital

Street Address: 525 East 68th Street

City: New York

State: New York

Zip: 10065

Phone: +12127461409

Preparer's Name: Nancy Damiani-Ferrante

Preparer's Title: Talent Acquisition Recruiter

Employee

Name: Emily Vicente

Home Street Address: 134 Elbert Street

City: Ramsey

State: New Jersey

Zip: 07446

Phone: 9734320023

Your rate of pay:
is an annual base salary of $122,046.60, plus all applicable differentials and premium pay under any Hospital policy

Designated pay day:
Biweekly Thursdays

General Statement Regarding Overtime Pay in New York State

Most employees in New York State must be paid overtime wages of 1½ times their regular rate of pay for all hours worked over 40 hours in a workweek. A very limited number of specific categories of employees must be paid overtime at a lower rate or not at all.

I affirm that I have accurately identified my primary language to my employer, and that (1) I have received notice in English, the language I identified, or (2) I received the notice in English because the Department of Labor has not published template notices in my primary language.

DEPARTMENT OF DEFENSE EDUCATION ACTIVITY
AMERICAS
700 WESTPARK DRIVE
PEACHTREE CITY, GA 30269-3554

LETTER OF INTENT TO RETURN FOR SCHOOL YEAR 2024/2025

It is time to plan for Teacher (Substitute) and Training Instructor (Substitute) positions for the 2024/2025 school year. Please complete all information requested below and return the form to your principal or immediate supervisor by **12-Apr-2024**.

The information on this form will be used for planning purposes only and does not change your employment status. This form is not binding and merely provides us with information to assist in planning for next year. While consideration is given to all requests, ***reassignments are not guaranteed by this document****.*

Name: VICENTE, EMILY R Not-To-Exceed (NTE) Date: 6/27/2024

Position: TEACHER (SUBSTITUTE) School: WEST POINT ES

Please check the appropriate space below:

X I **DO** plan to return for the 2024-2025 school year AND

X I would like to remain at my current school.

___ I request **consideration** to move to another school within the same **community or installation** for the 2024/2025 school year. Please specify school in the space below.

School Name: _____
Your Notification of Personnel Action (SF-50) will be 571 - Conv to Exc Appt NTE.
While consideration is given to all requests, ***reassignments are not guaranteed by this document****.*
Approval is based on district needs with agreement between both school principals.

___ I request **consideration** to move to another school within another DoDEA District for the 2024-2025 school year. Please specify District/School in the space below.

School/Installation Name: _____
Your Notification of Personnel Action (SF-50) will be 571 - Conv to Exc Appt NTE.
I understand all costs of this move will be incurred by me. Pay is based on local market rates and differs based on location. You do not retain your pay rate between locations.

___ I **DO NOT** plan to return for the 2024-2025 school year AND

___ I plan continue working through the end of this school year. I understand if I do not submit a resignation, my current appointment will expire on my NTE date. **I understand that a Notification of Personnel Action (SF-50) will be 355-Termination-Expiration of Appointment action effective on my NTE date.**

___ I would like to resign before the end of this school year. Please request a Resignation RPA from your School Secretary.

_____ **04/14/2024**
Signature Date

Emily R Vicente

107 Surrey Court
Ramsey, NJ 07446

Department: 100
Emp #: 4
Hire Date: 8/17/2020
Status: Active
Job Title:

Earnings	Hours	Gross Wages	Paid Earnings
Salary	160.00	2,692.32	2,692.32
	160.00	**2,692.32**	**2,692.32**

Taxes	Amount
SOC SEC EE	166.92
MED EE	39.04
FEDERAL WH	249.84
NY STATE WH	104.12
	559.92

Deductions	Amount
NYSDI	2.40
NYSPFL	10.04
	12.44

NetPay	Amount
NetPay	2,119.96

Employer Expenses	Amount
SOC SEC ER	166.92
MED ER	39.04
	205.96

Copy B—To Be Filed With Employee's FEDERAL Tax Return

W-2 Wage and Tax Statement **2022**

OMB No. 1545-0008

a. Employee's soc. sec. no.	1. Wages, tips, other comp	2. Fed. income tax withheld
XXX-XX-4445	53077.04	7381.92
b. Employer ID number (EIN)	3. Social security wages	4. Soc. sec. tax withheld
46-1462173	53077.04	3290.78
d. Control number	5. Medicare wages and tips	6. Medicare tax withheld
J298-4	53077.04	769.62

c. Employer's name, address, and ZIP code

SPH Trading LLC
2109 Broadway Apt 14-155
New York, NY 10023

e. Employee's name, address, and ZIP code

Emily R Vicente
107 Surrey Court
Ramsey, NJ 07446

7. Social security tips	8. Allocated tips	9.
10. Dependent care benefits	11. Nonqualified plans	12a. Code
13. Statutory employee	14. Other NYSDI 302.48	12b. Code
Retirement plan		12c. Code
Third-party sick pay		12d. Code

15. State	Employer's state ID no.	16. State wages, tips, etc.	17. State income tax
NY	461462173	53077.04	2559.08

18. Local wages, tips, etc..	19. Local income tax	20. Locality name

Department of the Treasury — Internal Revenue Service
This information is being furnished to the Internal Revenue Service.

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return

W-2 Wage and Tax Statement **2022**

OMB No. 1545-0008

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SPH Trading LLC
2109 Broadway Apt 14-155
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e. Employee's name, address, and ZIP code

Emily R Vicente
107 Surrey Court
Ramsey, NJ 07446

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NY	461462173	53077.04	2559.08

18. Local wages, tips, etc..	19. Local income tax	20. Locality name

Department of the Treasury — Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, address, ZIP/postal code, country & phone no.

Glen Rock School District
620 Harristown Road
Glen Rock NJ 07452
Business Office 201-445-7700

OMB No. 1545-0116

Form **1099-NEC**

(Rev. January 2022)

For calendar year 2022

Nonemployee Compensation

PAYER'S TIN	RECIPIENT'S TIN
22-6001837	145-98-4445

1 Nonemployee compensation
$ 1800.00

RECIPIENT'S name, address, ZIP/postal code & country

EMILY VINCENTE

134 ELBERT ST.

RAMSEY NJ 07446

2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐

3

4 Federal income tax withheld
$

Account number (see instructions)

5 State tax withheld	6 State/Payer's state no.	7 State income
$		$
$		$

Copy B
For Recipient

This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Form **1099-NEC** (Rev. 1-2022) (keep for your records) Department of the Treasury - Internal Revenue Service

a. Employee's Social Security Number	OMB No. 1545-0008		
*****4445			
b. Employer's Identification Number (EIN)	d. Control number	1 Wages, Tips, and other compensation	2 Federal Income Tax withheld
31-1575142		2916.00	7.58
c. Employer's Name, Address, and ZIP Code		3 Social Security Wages	4 Social Security Tax withheld
DEFENSE FINANCE & ACTG SERV ROOM 1907 1240 E 9TH STREET (ZKA) CLEVELAND OH 44199		2916.00	180.79
		5 Medicare Wages and Tips	6 Medicare Tax withheld
		2916.00	42.28
		7 Social Security tips	8 Allocated Tips
e/f. Employee's Name, Address, and ZIP Code		9	10 Dependent Care Benefits
EMILY R VICENTE 134 ELBERT ST RAMSEY NJ 07446-1406		12 See instructions for box 12	14 See instructions for box 14
		13 ☐ Statutory Employee ☐ Retirement Plan ☐ Third-party sick pay	

15 State	Employer's State ID Number	16 State Wages, Tips, etc	17 State Income Tax	18 Local wages, tips, etc	19 Local Income Tax	20 Locality name
NY	340727612	2916.00	40.36			
15 State	Employer's State ID Number	16 State Wages, Tips, etc	17 State Income Tax	18 Local wages, tips, etc	19 Local Income Tax	20 Locality name

Form W-2 Wage and Tax Statement 2022

Department of the Treasury - Internal Revenue Service
Copy B To Be Filed With Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service

a. Employee's Social Security Number	**OMB No. 1545-0008** This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.		
*****4445			
b. Employer's Identification Number (EIN)	d. Control Number	1 Wages, Tips, other compensation	2 Federal Income Tax withheld
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Department of the Treasury - Internal Revenue Service

Form W-2 Wage and Tax Statement 2022

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on Back of Copy B)

a. Employee's Social Security Number	OMB No. 1545-0008		
*****4445			
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EMILY R VICENTE 134 ELBERT ST RAMSEY NJ 07446-1406		12 See instructions for box 12	14 See instructions for box 14
		13 ☐ Statutory Employee ☐ Retirement Plan ☐ Third-party sick pay	

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NY	340727612	2916.00	40.36			
15 State	Employer's State ID Number	16 State Wages, Tips, etc	17 State Income Tax	18 Local wages, tips, etc	19 Local Income Tax	20 Locality name

Form W-2 Wage and Tax Statement 2022

Department of the Treasury - Internal Revenue Service

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

a. Employee's Social Security Number	OMB No. 1545-0008		
*****4445			
b. Employer's Identification Number (EIN)	d. Control Number	1 Wages, Tips, other compensation	2 Federal Income Tax withheld
31-1575142		2916.00	7.58
c. Employer's Name, Address, and ZIP Code		3 Social Security Wages	4 Social Security Tax withheld
DEFENSE FINANCE & ACTG SERV ROOM 1907 1240 E 9TH STREET (ZKA) CLEVELAND OH 44199		2916.00	180.79
		5 Medicare Wages and Tips	6 Medicare Tax withheld
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Form W-2 Wage and Tax Statement 2022

Department of the Treasury - Internal Revenue Service

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return

Notice to Employee

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for **2022** if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You cannot take the EIC if your investment income is more than the specified amount for **2022** or if income is earned for services provided while you were an inmate at a penal institution. For **2022** income limits and more information, visit www.irs.gov/eitc. Also see Pub. 596, Earned Income Credit. **Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's Social Security Number (SSN). For your protection, this form may only show the last four digits of your SSN. However, your employers have reported your complete SSN to the IRS and Social Security Administration (SSA).

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but are not the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 1-800-772-1213. You also may visit the SSA at *www.SSA.gov*.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in **2022** and more than $9,114 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than $5,350.80 in Tier 2 RRTA tax was withheld, you also may be able to claim a refund on Form 843. See the instructions for Form 843.

(Also see *Instructions for Employee* on the back of Copy C.)

Instructions for Employee (Also see *Notice to Employee* on the back of Copy B.)

Box 1. Enter this amount on the wages line of your tax return.

Box 2. Enter this amount on the federal income tax withheld line of your tax return.

Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959.

Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.

Box 8. This amount is **not** included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions. You must file Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F and S) and designated Roth contributions (codes AA, BB and EE) under all plans are generally limited to a total of $20,500 ($14,000 if you only have SIMPLE plans, $23,500 for section 403(b) plans, if you qualify for the 15-year rule explained in Pub. 571). However, if you were at least age 50 in **2022**, your employer may have allowed an additional deferral of up to $6,500 ($3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 instructions.

Note: If a year follows code D through H, S, Y, AA, BB or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year. Your employer does not use codes G, H, K, V, Y, Z, FF, GG, HH.

A - Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

B - Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.

C - Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to social security wage base), and 5).

D - Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E - Elective deferrals under a section 403(b) salary reduction agreement.

F - Elective deferrals under a section 408(k)(6) salary reduction SEP.

J - Nontaxable sick pay (information only, not included in boxes 1, 3, or 5).

L - Substantiated employee business expense reimbursements (nontaxable).

M - Uncollected Social Security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

N - Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.

P - Excludable moving expense reimbursements paid directly to member of Armed Forces (not included in boxes 1, 3, or 5).

Q - Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.

R - Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts.

S - Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1).

T - Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts.

W - Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

AA - Designated Roth contributions under a section 401(k) plan.

BB - Designated Roth contributions under a section 403(b) plan.

DD - Cost of employer-sponsored health coverage. **The amount reported with Code DD is not taxable.**

EE - Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs).

Box 14. Any amount in box 14 should be coded. The following explains the codes.

C - Taxable reimb for Permanent Change of Station (Incl in Box 1)

E - Military TSP Contribution (Tax Exempt)

F - TIAA/CREF and Fidelity Retirement Contributions

G - Pre-Tax Transportation Equity Act Benefits

H - Home to Work Transportation Fringe Benefits. (Incl in Box 1)

K - Pretax Vision and Dental Deduction

P - Parking Fringe Benefits/Employer Provided Vehicle. (Incl in Box 1)

R - Retirement Deductions. (for Civilian Employees who have wages earned in Puerto Rico)

S - Federal Employee Health Benefit employee deduction for Civilian Employees who have wages earned in Puerto Rico.

STT – Oregon Transit Tax

T - Cost of Living Allowance not included in box 1 or 16 for Civilian Employees who have COLA included for wages in Alaska, Hawaii, Guam and the Northern Mariana Islands, Puerto Rico and the U.S. Virgin Islands

U - Non-Cash Fringe Benefits (Incl in Box 1)

V - Pretax FEHB Incentive

X - Occupational Tax/Local Services Tax (CIVILIAN)

Y - Pretax Flexible Spending Accounts (CIVILIAN) Employee Contributions

Z - Retirement Deductions for Massachusetts Residents Only

DX - Sick Leave Wages $511/day limit

DY - Sick Leave Wages $200/day limit

DZ - Emergency Family Leave Wages

Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits**, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.

DEPARTMENT OF DEFENSE

CIVILIAN LEAVE AND EARNINGS STATEMENT LES

VISIT THE DFAS WEB SITE AT: WWW.DFAS.MIL

1. Pay Period End	2. Pay Date
10/19/24	10/25/24

3. Name	4. Pay Plan/Grade/Step	5. Hourly/Daily Rate	6. Basic OT Rate	7. Basic Pay + Locality/Market Adj = Adjusted Basic Pay		
VICENTE EMILY R	AD 00 00	23.96	0.00	0.00	0.00	0.00

8. Soc Sec No	9. Locality %	10. FLSA Category	11. SCD Leave	12. Max Leave Carry Over	13. Leave Year End
***-**-4445	0.00	E	09/06/22	240	01/11/25

14. Financial Institution - Net Pay	15. Financial Institution - Allotment #1	16. Financial Institution - Allotment #2
COLUMBIA BANK		

17. Tax	Marital Status	Exemptions	Add'l	18. Tax	Marital Status	Exemptions	Add'l	Taxing Authority	19. Cumulative Retirement	20. Military Deposit
FED	S	0	0			0	0			
NY	S	0	0							

21.	Current	Year to Date
GROSS PAY	634.94	2131.67
TAXABLE WAGES	634.94	2131.67
NONTAXABLE WAGES		
TAX DEFERRED WAGES		
DEDUCTIONS	70.04	187.16
AEIC		
NET PAY	564.90	1944.51

22.

CURRENT EARNINGS

TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT
REGULAR PAY	26.50	634.94						

DEDUCTIONS

TYPE	CODE	CURRENT	YEAR TO DATE	TYPE	CODE	CURRENT	YEAR TO DATE
MEDICARE		9.21	30.91	OASDI		39.36	132.16
TAX, FEDERAL		7.34	7.34	TAX, STATE	NY	14.13	16.75

LEAVE

TYPE	PRIOR YR BALANCE	ACCRUED PAY PD	ACCRUED YTD	USED PAY PD	USED YTD	DONATED/ RETURNED	CURRENT BALANCE	USE-LOSE/ TERM DATE

BENEFITS PAID BY GOVERNMENT FOR YOU

TYPE	CURRENT	YEAR TO DATE	TYPE	CURRENT	YEAR TO DATE
MEDICARE	9.21	30.91	OASDI	39.36	132.16

REMARKS

YOUR PAYROLL OFFICE ID NUMBER IS 97380500 - DEPARTMENT OF DEFENSE.
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PLEASE SUPPORT YOUR COMBINED FEDERAL CAMPAIGN GOING ON NOW
TO PROVIDE YOUR EMPLOYMENT AND/OR SALARY INFORMATION TO AN ORGANIZATION (BUSINESS, BANK,
CREDIT UNION) OR PERSON, LOGIN TO THE DCPDS PORTAL HTTPS://COMPO.DCPDS.CPMS.OSD.MIL/, GO
TO MYBIZ EMPLOYMENT VERIFICATION, AND EMAIL INFORMATION DIRECTLY TO THE REQUESTOR.
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RETROACTIVE TIME AND ATTENDANCE ADJUSTMENTS PROCESSED.

DEPARTMENT OF DEFENSE

CIVILIAN LEAVE AND EARNINGS STATEMENT LES

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1. Pay Period End	2. Pay Date
10/05/24	10/11/24

3. Name	4. Pay Plan/Grade/Step	5. Hourly/Daily Rate	6. Basic OT Rate	7. Basic Pay + Locality/Market Adj = Adjusted Basic Pay		
VICENTE EMILY R	AD 00 00	23.96	0.00	0.00	0.00	0.00

8. Soc Sec No	9. Locality %	10. FLSA Category	11. SCD Leave	12. Max Leave Carry Over	13. Leave Year End
***-**-4445	0.00	E	09/06/22	240	01/11/25

14. Financial Institution - Net Pay	15. Financial Institution - Allotment #1	16. Financial Institution - Allotment #2
COLUMBIA BANK		

17. Tax	Marital Status	Exemptions	Add'l	18. Tax	Marital Status	Exemptions	Add'l	Taxing Authority	19. Cumulative Retirement	20. Military Deposit
FED	S	0	0			0	0			
NY	S	0	0							

21.	Current	Year to Date
GROSS PAY	323.46	1496.73
TAXABLE WAGES	323.46	1496.73
NONTAXABLE WAGES		
TAX DEFERRED WAGES		
DEDUCTIONS	26.30	117.12
AEIC		
NET PAY	297.16	1379.61

22.

CURRENT EARNINGS

TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT
REGULAR PAY	13.50	323.46						

DEDUCTIONS

TYPE	CODE	CURRENT	YEAR TO DATE	TYPE	CODE	CURRENT	YEAR TO DATE
MEDICARE		4.69	21.70	OASDI		20.06	92.80
TAX, FEDERAL				TAX, STATE	NY	1.55	2.62

LEAVE

TYPE	PRIOR YR BALANCE	ACCRUED PAY PD	ACCRUED YTD	USED PAY PD	USED YTD	DONATED/ RETURNED	CURRENT BALANCE	USE-LOSE/ TERM DATE

BENEFITS PAID BY GOVERNMENT FOR YOU

TYPE	CURRENT	YEAR TO DATE	TYPE	CURRENT	YEAR TO DATE
MEDICARE	4.69	21.70	OASDI	20.06	92.80

REMARKS

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YOUR PASSWORD HAS BEEN ESTABLISHED/CHANGED FOR ACCESSING MYPAY.
IF YOU DID NOT TAKE THIS ACTION, CONTACT 1-888-332-7411 OR (216) 522-5096.

DEPARTMENT OF DEFENSE

CIVILIAN LEAVE AND EARNINGS STATEMENT LES

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1. Pay Period End	2. Pay Date
10/19/24	10/25/24

3. Name	4. Pay Plan/Grade/Step	5. Hourly/Daily Rate	6. Basic OT Rate	7. Basic Pay + Locality/Market Adj = Adjusted Basic Pay		
VICENTE EMILY R	AD 00 00	23.96	0.00	0.00	0.00	0.00

8. Soc Sec No	9. Locality %	10. FLSA Category	11. SCD Leave	12. Max Leave Carry Over	13. Leave Year End
***-**-4445	0.00	E	09/06/22	240	01/11/25

14. Financial Institution - Net Pay	15. Financial Institution - Allotment #1	16. Financial Institution - Allotment #2
COLUMBIA BANK		

17. Tax	Marital Status	Exemptions	Add'l	18. Tax	Marital Status	Exemptions	Add'l	Taxing Authority	19. Cumulative Retirement	20. Military Deposit
FED	S	0	0			0	0			
NY	S	0	0							

21.	Current	Year to Date
GROSS PAY	634.94	2131.67
TAXABLE WAGES	634.94	2131.67
NONTAXABLE WAGES		
TAX DEFERRED WAGES		
DEDUCTIONS	70.04	187.16
AEIC		
NET PAY	564.90	1944.51

22.

CURRENT EARNINGS

TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT
REGULAR PAY	26.50	634.94						

DEDUCTIONS

TYPE	CODE	CURRENT	YEAR TO DATE	TYPE	CODE	CURRENT	YEAR TO DATE
MEDICARE		9.21	30.91	OASDI		39.36	132.16
TAX, FEDERAL		7.34	7.34	TAX, STATE	NY	14.13	16.75

LEAVE

TYPE	PRIOR YR BALANCE	ACCRUED PAY PD	ACCRUED YTD	USED PAY PD	USED YTD	DONATED/ RETURNED	CURRENT BALANCE	USE-LOSE/ TERM DATE

BENEFITS PAID BY GOVERNMENT FOR YOU

TYPE	CURRENT	YEAR TO DATE	TYPE	CURRENT	YEAR TO DATE
MEDICARE	9.21	30.91	OASDI	39.36	132.16

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DEPARTMENT OF DEFENSE

CIVILIAN LEAVE AND EARNINGS STATEMENT LES

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1. Pay Period End	2. Pay Date
10/05/24	10/11/24

3. Name	4. Pay Plan/Grade/Step	5. Hourly/Daily Rate	6. Basic OT Rate	7. Basic Pay + Locality/Market Adj = Adjusted Basic Pay		
VICENTE EMILY R	AD 00 00	23.96	0.00	0.00	0.00	0.00

8. Soc Sec No	9. Locality %	10. FLSA Category	11. SCD Leave	12. Max Leave Carry Over	13. Leave Year End
***-**-4445	0.00	E	09/06/22	240	01/11/25

14. Financial Institution - Net Pay	15. Financial Institution - Allotment #1	16. Financial Institution - Allotment #2
COLUMBIA BANK		

17. Tax	Marital Status	Exemptions	Add'l	18. Tax	Marital Status	Exemptions	Add'l	Taxing Authority	19. Cumulative Retirement	20. Military Deposit
FED	S	0	0			0	0			
NY	S	0	0							

21.	Current	Year to Date
GROSS PAY	323.46	1496.73
TAXABLE WAGES	323.46	1496.73
NONTAXABLE WAGES		
TAX DEFERRED WAGES		
DEDUCTIONS	26.30	117.12
AEIC		
NET PAY	297.16	1379.61

22.

CURRENT EARNINGS

TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT
REGULAR PAY	13.50	323.46						

DEDUCTIONS

TYPE	CODE	CURRENT	YEAR TO DATE	TYPE	CODE	CURRENT	YEAR TO DATE
MEDICARE		4.69	21.70	OASDI		20.06	92.80
TAX, FEDERAL				TAX, STATE	NY	1.55	2.62

LEAVE

TYPE	PRIOR YR BALANCE	ACCRUED PAY PD	ACCRUED YTD	USED PAY PD	USED YTD	DONATED/ RETURNED	CURRENT BALANCE	USE-LOSE/ TERM DATE

BENEFITS PAID BY GOVERNMENT FOR YOU

TYPE	CURRENT	YEAR TO DATE	TYPE	CURRENT	YEAR TO DATE
MEDICARE	4.69	21.70	OASDI	20.06	92.80

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DEPARTMENT OF DEFENSE

CIVILIAN LEAVE AND EARNINGS STATEMENT LES

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1. Pay Period End	2. Pay Date
09/21/24	09/27/24

3. Name	4. Pay Plan/Grade/Step	5. Hourly/Daily Rate	6. Basic OT Rate	7. Basic Pay + Locality/Market Adj = Adjusted Basic Pay		
VICENTE EMILY R	AD 00 00	23.96	0.00	0.00	0.00	0.00

8. Soc Sec No	9. Locality %	10. FLSA Category	11. SCD Leave	12. Max Leave Carry Over	13. Leave Year End
***-**-4445	0.00	E	09/06/22	240	01/11/25

14. Financial Institution - Net Pay	15. Financial Institution - Allotment #1	16. Financial Institution - Allotment #2
COLUMBIA BANK		

17. Tax	Marital Status	Exemptions	Add'l
FED	S	0	0
NY	S	0	0

18. Tax	Marital Status	Exemptions	Add'l	Taxing Authority
		0	0	

19. Cumulative Retirement	20. Military Deposit

21.	Current	Year to Date
GROSS PAY	311.48	1173.27
TAXABLE WAGES	311.48	1173.27
NONTAXABLE WAGES		
TAX DEFERRED WAGES		
DEDUCTIONS	24.89	90.82
AEIC		
NET PAY	286.59	1082.45

22.

CURRENT EARNINGS

TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT	TYPE	HOURS/DAYS	AMOUNT
REGULAR PAY	13.00	311.48						

DEDUCTIONS

TYPE	CODE	CURRENT	YEAR TO DATE	TYPE	CODE	CURRENT	YEAR TO DATE
MEDICARE		4.51	17.01	OASDI		19.31	72.74
TAX, FEDERAL				TAX, STATE	NY	1.07	1.07

LEAVE

TYPE	PRIOR YR BALANCE	ACCRUED PAY PD	ACCRUED YTD	USED PAY PD	USED YTD	DONATED/ RETURNED	CURRENT BALANCE	USE-LOSE/ TERM DATE

BENEFITS PAID BY GOVERNMENT FOR YOU

TYPE	CURRENT	YEAR TO DATE	TYPE	CURRENT	YEAR TO DATE
MEDICARE	4.51	17.01	OASDI	19.31	72.74

REMARKS

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Columbia Bank
19-01 Route 208 North • Fair Lawn, NJ 07410

Statement Ending 07/31/2024

Customer Number: 4608755

RETURN SERVICE REQUESTED

EMILY RAE VICENTE OR
BARBARA E KOMOR
134 ELBERT ST
RAMSEY NJ 07446-1406

Managing Your Accounts

Customer Service Center	800-522-4167
Website	Columbiabankonline.com
Mailing Address	19-01 Route 208 North Fair Lawn, NJ 07410

Columbia Bank consistently reviews its products and services to implement enhancements for you. As such, the enclosed Consumer Overdraft Protection disclosure will be effective as of September 1, 2024, and incorporates two new scenarios in which we will waive overdraft fees for your account.

- Scenario 1: When a merchant submits an authorization request and your available balance is sufficient to cover the transaction, but later, and at the time of settlement, your account balance is insufficient to cover the transaction. You will not be charged a fee because you had a sufficient available balance at the time of authorization.
- Scenario 2: When a company or third party submits an item that was previously returned unpaid in an attempt to collect your payment at another time. In the event a re-submission is properly coded as a retry payment and is identified by us, you will not be charged an additional insufficient funds fee as you already paid an NSF fee on the item.

For more information, please review the highlighted sections on the attached disclosure. Should you have questions about our new practices, or should you wish to review your overdraft services election, please contact your local branch. You can review or update your overdraft election at any time.

Summary of Accounts

Account Type	Account Number	Ending Balance
Cash Back	4608755	$243.73

Cash Back-4608755

Account Summary

Date	Description	Amount
07/01/2024	**Beginning Balance**	**$4,213.55**
	5 Credit(s) This Period	$3,021.95
	9 Debit(s) This Period	$6,991.77
07/31/2024	**Ending Balance**	**$243.73**

Account Activity

Post Date	Description	Debits	Credits	Balance
07/01/2024	**Beginning Balance**			**$4,213.55**
07/01/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$3,471.87		$741.68
07/02/2024	External Withdrawal 000042NEW HORIZN 0000042 T ROWE PRI - TRAN000042	$300.00		$441.68

Cash Back-4608755 (continued)

Account Activity (continued)

Post Date	Description	Debits	Credits	Balance
07/11/2024	External Withdrawal 000042NEW HORIZN 0000042 T ROWE PRI - TRAN000042	$300.00		$141.68
07/12/2024	External Deposit J298 SPH TRADI J298 00234SPH T00229 - Payroll		$1,059.97	$1,201.65
07/12/2024	Deposit INTERNET TRANSFER FROM : XXXX8186		$700.00	$1,901.65
07/15/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$1,452.48		$449.17
07/18/2024	NOW Withdrawal Zelle LUIS CAMBARA 800-522-4167	$40.00		$409.17
07/18/2024	External Withdrawal CIGNA 877-484-59 - 8774845967	$100.00		$309.17
07/23/2024	Deposit INTERNET TRANSFER FROM : XXXX8186		$100.00	$409.17
07/23/2024	NOW Withdrawal Zelle SAMANTHA GOLDMAN 800-522-4167	$56.50		$352.67
07/26/2024	External Deposit J298 SPH TRADI J298 00234SPH T00230 - Payroll		$1,059.98	$1,412.65
07/26/2024	External Deposit VENMO - CASHOUT		$102.00	$1,514.65
07/29/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$970.92		$543.73
07/31/2024	External Withdrawal 000042NEW HORIZN 0000042 T ROWE PRI - TRAN000042	$300.00		$243.73
07/31/2024	**Ending Balance**			**$243.73**

Overdraft and Returned Item Fees

	Total for this period	Total year-to-date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

NO.		
	$	
	$	
	$	
	$	
	$	
	$	
	$	
	$	
TOTAL	$	

THIS AREA IS PROVIDED TO HELP YOU BALANCE YOUR CHECKING ACCOUNT STATEMENT

If your Checking Account has overdraft protection, remember to record the dollar amount of funds transferred into your checking account from your other designated deposit account or from your Premium Overdraft or your CheckRight Overdraft Line of Credit.

Bank Balance Shown on this Statement

ADD+

Deposits not credited on this Statement (If Any)

SUBTOTAL

SUBTRACT-

Checks Outstanding

TOTAL

Should agree with checkbook balance after adding interest and deducting service charges (if any) shown on your checking statement. Please report any difference to us within10 days of receipt of this statement. If no difference is reported in 10 days, the account will be considered correct. Direct checking account inquires to the branch servicing it or to our customer service center at 1-800-522-4167.

IMPORTANT NOTICE

1. Always be alert to your surroundings and defer ATM transactions if circumstances cause you to be apprehensive.
2. Close the entry door of any ATM facility so equipped.
3. Put away withdrawn cash before exiting any ATM facility.
4. Direct any complaints concerning ATM security to an appropriate department of the owner of the ATM or to the NJ Department of Banking.
5. If you have any concerns about the security of any ATM owned and operated by Columbia Bank, call 1-800-522-4167 or the NJ Department of Banking at 609-292-7272.

LOST OR STOLEN DEBIT CARD

To report a lost or stolen Columbia Bank Debit Card, please call 800-522-4167, Monday through Friday from 7:30am - 8:00pm and Saturday, Sunday from 8:00am - 4:00 PM. After normal business hours, please call 800-472-3272.

THE FOLLOWING DISCLOSURE RELATES TO ACCOUNTS THAT CAN BE ACCESSED VIA ELECTRONIC FUND TRANSFERS

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUND TRANSFERS

Telephone us at 800-522-4167 (outside the Continental US call (201)796-3600) or write us at Columbia Bank, 19-01 Route 208 North, Fair Lawn, NJ 07410 ATTN: Customer Service Center, as soon as you can if you think your statement or receipt is wrong or if you need more information about a transfer or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number.
2. Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe there 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 the use of the money during the time it takes us to complete our investigation.

YOU MUST PUT YOUR COMPLAINT OR QUESTION IN WRITING EVEN IF YOU CALL. IF WE DO NOT RECEIVE IT WITHIN 10 BUSINESS DAYS OF RECEIPT OF THIS STATEMENT, WE MAY NOT CREDIT YOUR ACCOUNT.

IMPORTANT INFORMATION REGARDING YOUR OVERDRAFT PROTECTION LINE OF CREDIT STATEMENT

"PREV. BALANCE" and "PRIOR STATEMENT BALANCES" is the total unpaid principal at the beginning of the billing cycle. "NEW BALANCE" is the total unpaid principal at the end of the cycle.

Refer to the "TRANSACTION SECTION." The information within this section relates to the transactions that occurred during the statement cycle. Transactions shown in this section are the result of transactions affecting the loan. Transactions affecting the principal such as loans being made, the principal portion of payments received (if any), and other adjustments made. The principal balance from each of these figures is stated in the "PRINCIPAL" column. The principal balance remains unchanged between the dates of activity indicated.

The statement also totals fees assessed for the cycle and year-to-date. It also totals interest charged for the cycle and year-to-date.

Any payments received at other than the billing address may be subject to delays in posting.

The current interest rate is divided by 365 to arrive at the daily periodic rate. The daily periodic rate is multiplied by each of the different principal balances and then by the number of days each balance remained unchanged. The sum of these calculations equals the interest charge disclosed on the statement.

Send payment to:
Columbia Bank
P.O. Box 70402
Philadelphia, PA 19176-0402

Send billing inquiries to:
Columbia Bank
Attn: Loan Accounting Department
19-01 Route 208 North
Fair Lawn, NJ 07410

THE FOLLOWING DISCLOSURE REQUIRED BY FEDERAL LAW APPLIES TO OVERDRAFT PROTECTION LINE OF CREDIT ACCOUNTS. IT DOES NOT APPLY TO COMMERCIAL LINE OF CREDIT ACCOUNTS.

BILLING RIGHTS SUMMARY

What To Do If You Think You Find A Mistake On Your Statement

If you think there is an error on your statement, write to us on a separate sheet at the address shown above for billing inquiries.

In your letter, give us the following information.

- **Account information:** Your name and account number
- **Dollar Amount**
- **Description of Problem:** If you think there is an error on your bill, describe 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, the following are true:

- 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 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.

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Your Guide To

Consumer Overdraft Protection

Columbia Bank

Member FDIC

EQUAL HOUSING LENDER

Count on Columbia

ColumbiaBankOnline.com

General Information on Overdrafts

What is an overdraft?

An overdraft occurs when you don't have enough money in your checking account to cover an item presented against your account. Items are presented when you make payments or purchases through methods like checks, automatic bill payments, your debit card or ACH.

When this occurs, the Bank may choose to extend a courtesy cushion to cover your item. In some cases, the Bank may choose to return the item, leaving your item unpaid. Regardless of the outcome, overdraft services can help cover items when insufficient funds are available or when mistakes happen.

Avoiding Overdrafts:

The best way to avoid an overdraft is to responsibly manage your finances. Below are some suggested ways to help manage your account. Additionally, in the event multiple items are presented against your account, you should be aware of Columbia Bank's posting order. Please review the below charts for more information.

Managing Overdraft Risk

1. Schedule transfers when you anticipate your balance to be low

2. Set up account alerts through Online Banking (web version)

3. Utilize Online and Mobile Banking to regularly check your account balance

4. When in doubt, visit a branch or call our Customer Service Center at (800) 522-4167

Our Posting Order:

Cash deposits and withdrawals processed by a teller are posted in the order they are received. Transactions not performed with a teller, such as electronic items and inclearing checks, may not be processed in the order in which they were transacted. While it is impossible to list all types of transactions here is our posting order for the most common types of transactions.

We reserve the right to change the order of payment without notice to you if we suspect fraud or possible illegal activity affecting your account. Contact us if you have any questions regarding transaction types and posting order.

1. We post credits (deposits) first
2. Pay electronic debits
3. Followed by inclearing checks beginning with the lowest dollar amount**

**As a reminder, the merchant may convert your paper check to an ACH, which will be processed as an electronic item.

How the Bank Calculates My Available Balance and Information About Holds:

Available Balance:

- ► Your available balance is the amount of money in your account that you can use without causing an overdraft. Your available balance includes all credits and debits that have posted to your account, and is reduced by any holds on your account, including authorization holds and deposit holds.
- ► Your available balance may change during the course of a day as debit transactions and deposits are made. The available balance provided to you by the Bank may not include all of your transactions, such as checks you have written that have not yet cleared or upcoming automatic payments.
- ► You agree that it is your responsibility to keep track of your available balance as you make transactions in order to avoid overdrafts and fees.
- ► Your monthly account statement does not report the holds affecting your account on any given day; as a result, the daily balances reported in your statement may not reflect your available balance(s) occurring on that day.

Authorization Holds:

- ► When you use your debit card to make a purchase, you authorize the merchant to ask us to approve the transaction. When we approve the transaction, we commit to pay the merchant at the merchant's request. We call this "authorizing" the transaction. Our decision to authorize or decline the transaction is based on your account's available balance (as defined above) at the time of the request, plus, at our sole discretion, any available overdraft coverage.
- ► There is often a delay between the date we authorize a debit card transaction and the date the merchant submits it to us for payment (settlement). We place a hold on your account for any authorized debit card transaction at the time we authorize it, and the hold remains on your account until we pay it. The amount of the hold will be the amount we have authorized, based on the request we receive from the merchant, or as permitted under applicable payment network rules.
- ► The amount held based on an authorization request is not applied to any specific debit card transaction. If an authorized debit card transaction is not submitted to us for payment within three (3) business days after we first apply the hold, we will release the hold from your account (this is referred to as an Expired Hold).
- ► Authorization holds reduce your available balance. An authorization hold can result in a $35 NSF-Paid or $35 NSF-Returned fee if additional items are presented for payment that exceed the reduced available balance resulting from the hold.

- The amount of an authorization request and hold may not equal the amount the merchant ultimately presents for payment. Certain merchants (for example, hotels, car rentals, restaurants and gas stations) may submit authorization requests that are higher than the prices of the goods or services ultimately purchased. However, if an authorization hold is pending on your account, and another transaction is presented for payment that exceeds your available balance, you may be charged a fee even if you would have had a sufficient available balance to cover the item if the amount of the authorization hold was equal to the amount the merchant ultimately presents for payment. This is because you cannot use funds that were previously committed to pay an alternative transaction.
- When a merchant submits an authorization request and your available balance is sufficient to cover the transaction, we agree to make that payment. However, if your transaction is settled later and at the time of settlement your account balance is insufficient to cover the transaction, you will not be charged a fee because you had a sufficient balance at the time of authorization.

Deposit Holds:

- Deposit holds are different from authorization holds. Please read our Funds Availability Policy, Consumer Mobile Remote Deposit Services Agreement and/or other applicable agreements for more detail on how and when we make funds available to you. We may at our sole discretion include funds subject to a deposit hold in your available balance for purposes of determining insufficient funds fees; however, if such deposits are returned, rejected or otherwise do not make it into your account, you may be assessed fees.

Examples of Available Balances, Authorization Holds and Overdraft Thresholds:

The following is a hypothetical example of how you may be charged due to an authorization hold:

- Your account has an available balance of $100, and you swipe your debit card at a gas station to make a purchase. The gas station requests authorization of $100.
- The Bank authorizes the payment. When the Bank authorizes the payment, it immediately places a hold on your account for the $100 authorization, reducing your available balance to $0 ($100 minus $100).
- You actually pump $20 worth of gas. The gas station does not submit the authorized amount of $20 to the Bank for payment until three (3) days after your purchase.
- Before the gas station submits the amount of $20, a check you wrote for $70 is presented against your account.
- Because the authorized gas station purchase reduced your available balance to $0 before the $70 check was presented, the check would have potentially overdrawn your account by $70 if it were paid. This is true because although the Bank will only pay the gas station $20, the authorization hold of $100 from the gas station has not yet fallen off the account and funds are not available for use.

- Because this $70 is larger than the $50 minimum overdraft (explained later in this document) amount to be assessed a fee, you will be charged either a $35 NSF-Paid or $35 NSF-Returned fee based on the Bank's decision to pay or return the item.

The following is a hypothetical example of when you will not be charged due to an authorization hold:

- Your account has an available balance of $100, and you swipe your debit card at a gas station to make a purchase. The gas station requests authorization of $100.
- The Bank authorizes the payment. When the Bank authorizes the payment, it immediately places a hold on your account for the $100 authorization, reducing your available balance to $0 ($100 minus $100).
- After three days, the gas station does not request settlement of the payment, so the hold expires and the $100 is now available for use. You pay bills and buy lunch, reducing your available balance.
- The following day, the gas station requests payment of $100, but your available balance is now insufficient to cover the transaction.
- You will **not** be assessed an NSF fee because at the time of authorization, you had a sufficient balance to cover the item.

Your Options:

Columbia Bank offers several services to clients in order to assist you when unanticipated expenses or simple mistakes leave you with too little cash in your checking account. An overview of our Consumer Overdraft Services are listed below. You can choose to enroll or unenroll in any of these services at any time by contacting your local branch or our Customer Service Center at (800) 522-4167. Some services may be automatically attached to your account at account opening. Please review each product's description for more information.

- Premium Overdraft: A courtesy overdraft cushion available for consumer checking and money market accounts.
- Non-Premium Overdraft: The Bank may choose to pay certain items presented against your account. When you opt-out of Premium Overdraft, the Bank will decision any items that may overdraw your account.
- Account Link: Link your checking account to an eligible secondary account held by Columbia Bank that will transfer funds when your checking account may become overdrawn.
- CheckRight Overdraft Line of Credit
- Ready Reserve Overdraft Line of Credit (no longer offered)

If you already have a service that is no longer offered, this document explains the order in which these services will be used to cover overdrafts up to certain limits. If you do not have these services, sections that reference these services do not apply to you.

More About Premium Overdraft

What is Premium Overdraft?

- Premium Overdraft is a courtesy overdraft service for consumer checking and money market accounts in good standing.
- Premium Overdraft is not a loan, it is an "emergency cushion" we automatically provide to most checking and money market accounts in good standing. We typically consider your account in good standing if you:
    1. Demonstrate responsible account management (e.g. making regular deposits, ensuring that your account is brought to a positive balance at least once every 30 days—including the payment of all bank fees and charges, etc.),
    2. Avoid excessive overdrafts, and
    3. There are no legal orders, levies or liens against your account.

How to Enroll:

At account opening, you will be asked if you would like to enroll in our Premium Overdraft service. Please review the below chart to learn more about how to enroll in Consumer Premium Overdraft coverage, what it pays and any associated fees.

	Standard Premium Overdraft (Default) Partial Opt-In	**Opt-In to One-Time Debit Card and ATM Overdraft Full Opt-In**
Action	**This is our standard account setting (excluding Forward Checking).** You will be asked if you would like to remain in this setting at account opening. You can indicate you would like to remain in this setting by signing our Consumer Overdraft Coverage Election form. You must return a signed, amended Consumer Overdraft Coverage form to update your coverage.	**This service is only available if you are enrolled in Standard Premium Overdraft.** You will be asked if you would like to enroll in this service at account opening. If you would like to enroll, you must opt-in by signing our Consumer Overdraft Coverage Election form. You must return a signed, amended Consumer Overdraft Coverage Election form to update your coverage.
Pays	Up to $500 (up to $300 for Peach Tree Checking) in automatic bill payments, checks and ACH payments, assuming your account is in good standing. *	This additional service authorizes us to pay ATM transactions and one-time debit card transactions when you do not have enough money in your account. When you choose to opt-in to this service, one-time debit card and ATM transactions will be included in your Premium Overdraft limit. For an example of a one-time debit card transaction please review our "Your Guide to Consumer Overdraft Protection" disclosure.
Fees	If a presented item would overdraw your account by exactly $50 or less, no $35 NSF-Paid or $35 NSF-Returned fee would apply. If a presented item would overdraw your account by more than $50, you will receive either a $35 NSF-Paid or $35 NSF-Returned fee based on the Bank's decision to pay or return the item. **Subject to the Bank's discretion, the Bank will attempt to pay your item, within your available overdraft limit.** A daily maximum of one $35 NSF fee per day applies. In the event your item is returned, you may also be subject to charges by your merchant for returned items. Items may be represented and incur more than one fee if they are not appropriately submitted as a retry payment. If such represented items are coded as retry payments and identified by us, fees on represented items will be waived. Please see our "Your Guide to Consumer Overdraft Protection" disclosure for more details.	If a presented item would overdraw your account by exactly $50 or less, no $35 NSF-Paid or $35 NSF-Returned fee would apply. If a presented item would overdraw your account by more than $50, you will receive either a $35 NSF-Paid or $35 NSF- Returned fee based on the Bank's decision to pay or return the item. **Subject to the Bank's discretion, the Bank will attempt to pay your item, within your available overdraft limit.** A daily maximum of one $35 NSF fee per day applies. Items may be represented and incur more than one fee if they are not appropriately submitted as a retry payment. If such represented items are identified by us, such fees on represented items will be waived. Please see our "Your Guide to Consumer Overdraft Protection" disclosure for more details.

*Select checking products may have higher limits

One-Time Debit Card and ATM Overdraft Services:

Due to federal regulation, we do not authorize ATM transactions and everyday Columbia Bank debit card transactions unless you opt-in to the service. For an example of a one-time debit card transaction please see below.

- **Example of a "one-time" Debit Card Transaction:** If you are at the supermarket and use your debit card to make your purchase, the transaction will not be approved if you do not have enough available funds in your checking account. These non-scheduled (non-recurring) transactions are considered one-time debit card transactions. If you have Premium Overdraft and wish to have your ATM and one-time Debit Card transactions approved in the case of insufficient funds, you need to Opt-In via a Consumer Overdraft Coverage Election Form.
- **Recurring debit card transactions:** An opt-in is not required for the payment of recurring (or scheduled) debit card transactions. For example, if you provided your debit card number to your local gym to pay for monthly dues, they may be approved against insufficient funds and standard overdraft fees will apply.

Notice for Premium Overdraft

- When you enroll in our Premium Overdraft service, you will receive notice via mail after an item is presented against insufficient funds. The notice will detail if the item was paid or returned based on your available overdraft limit, as well as any associated fees that were applied by the Bank. If your account is not brought positive, you will also be notified via mail when your account becomes 15 days overdrawn, 30 days overdrawn and 45 days overdrawn. Your account will be charged off if your account is overdrawn for 60 consecutive days and you will be reported to ChexSystems, a nationwide consumer reporting agency.

Additional Information on Premium Overdraft:

- This is a non-contractual courtesy that is available to individually/jointly owned consumer checking accounts (excluding Forward Checking) in good standing for personal or household use. Columbia Bank reserves the right to limit participation to one account per household and to discontinue this service without prior notice. Whether your overdrafts will be paid is discretionary and we reserve the right not to pay. For example, we typically do not pay overdrafts if your account is not in good standing, or you are not making regular deposits, or you have too many overdrafts. Premium Overdraft pays all overdraft items and assesses overdraft charges up to your Premium Overdraft limit. If total overdraft items and fees exceed this limit, any remaining items may be paid or returned at the discretion of the bank. The amount of any overdraft plus our standard overdraft and NSF returned items fees that you owe us shall be payable within 30 days of becoming overdrawn.

Non-Premium Overdraft:

You may choose to opt-out of our Premium Overdraft service at account opening, by contacting your local branch or by contacting our Customer Service Center at (800) 522-4167. When you choose to opt-out of our Premium Overdraft service, it is still possible to overdraw your account. We refer to this as Non-Premium Overdraft because you have indicated that you would prefer that the Bank decision presented items on your behalf at the time of presentment.

	Opt-Out of Premium Overdraft (Non-Premium Overdraft) Full Opt-Out
Action	You will be asked if you'd like to opt-out of Premium Overdraft at account opening. You can change this coverage at any time by contacting your local branch or our Customer Service Center at (800) 522-4167.
Pays	In the event an item is presented against your account, and you do not have sufficient funds to cover the item, the Bank, at its sole discretion, will make a decision to pay or return each item.
Fees	If a presented item would overdraw your account by exactly $50 or less, no $35 NSF-Paid or $35 NSF-Returned fee would apply. If a presented item would overdraw your account by more than $50, you will receive either a $35 NSF-Paid or $35 NSF-Returned fee based on the Bank's decision to pay or return the item. A daily maximum of one $35 NSF fee per day applies. In the event your item is returned, you may also be subject to charges by your merchant for returned items. Items may be represented and incur more than one fee if they are not appropriately submitted as a retry payment. If such represented items are identified by us, such fees on represented items will be waived. Please see our "Your Guide to Consumer Overdraft Protection" disclosure for more details.

Notice:

► When you opt-out of our Premium Overdraft service, you will receive notice via mail after an item is presented against insufficient funds. The notice will detail if the item was paid or returned, as well as any associated fees that were applied by the Bank. There will be no subsequent notices sent to you if your account remains in an overdrawn status. Your account will be charged off if your account is overdrawn for 60 consecutive days and you will be reported to ChexSystems, a nationwide consumer reporting agency.

Additional Information on Overdrafts:

Item Decisioning:

If your available balance is insufficient to pay an item when it is processed and posted in the order set forth within our agreements with you, we may, in our sole discretion, choose to pay the item or return the item. When the Bank chooses to pay an item, you may be assessed a $35 NSF–Paid fee and your merchant will be paid. When the Bank chooses to return an item, you may be assessed a $35 NSF–Returned fee and your merchant will not be paid. You may also be subject to charges by your merchant for returned items.

Representment:

Please be aware that companies and other third parties sometimes re-submit items that we return unpaid in an attempt to collect your payment at another time. Companies have the ability to code re-submitted items as "retry payments". In the event a re-submission is properly coded as a retry payment and is identified by us, you will not be charged an additional insufficient funds fee as you already paid an NSF fee on the item. You agree that if any transaction is submitted for payment as a new item and not as a re-submission "retry payment" after having previously been returned unpaid by us, an insufficient funds fee may be assessed if your available balance is insufficient to pay the item.

Your Responsibility:

You must immediately pay all fees, overdrafts and other amounts you owe us as a result of the insufficient funds. These amounts may be paid out of any subsequent deposit to your account (including deposits of payroll and government benefits).

Fee Limits:

Regardless of whether you enroll in our Premium Overdraft Program or if you opt-out of our Premium Overdraft Program, the Bank will not assess more than one $35 NSF-Paid or one $35 NSF-Returned item fee in one day.

Fees are generally incurred on the day that the activity occurred and are posted to your account on the same day if it is a business day or the next business day if it is not a business day. As a result, you may see more than one fee posted on the same business day.

This may occur when items incur a fee on a non-business day and then items incur an additional fee on the next business day. Both fees will post on the same business day.

We will not charge an insufficient funds fee, whether NSF-Paid or NSF-Returned, if the item would not cause your account to become overdrawn by more than $50 (as determined by your available balance).

Account Link:

About Account Link:

Account Link is an additional overdraft service that does not relate to any of the above-mentioned Premium Overdraft or Non-Premium Overdraft coverage options. Account Link is utilized before other overdraft services that may be attached to your account.

Account Link attaches your checking account balance with an eligible secondary account held by Columbia Bank, usually a savings account, money market account or a secondary checking account. In the event your checking balance cannot cover an incoming item, Account Link transfers funds from your secondary account to your overdrawn checking account in $100 increments. The daily maximum dollar amount of transfers is $2,500. To enroll in this service, please contact your local branch.

Account Link Fees:

The fee for each transfer is currently $10, with a daily maximum of $20.

Our Overdraft Service Processing Order:

If you have multiple Overdraft Protection Services, available funds or limits will be processed in the following order:

1. Account Link	Only requires a secondary account (Statement Savings, Money Market, secondary Checking) keeping enough funds in your secondary account for enough protection. Fees apply.
2. CheckRight Overdraft Protection Line of Credit	**CheckRight Overdraft Protection Line of Credit** can be very cost effective if outstanding balances are paid shortly after the overdraft occurs. Refer to your credit line agreement for information on interest rates.
3. Ready Reserve Overdraft Line of Credit (no longer offered)	**Ready Reserve Overdraft Line of Credit** can be very cost effective if outstanding balances are paid shortly after the overdraft occurs. Refer to your credit line agreement for information on interest rates.
4. Premium Overdraft	Automatically extended to accounts in good standing. Fees apply.

Columbia Bank
19-01 Route 208 North • Fair Lawn, NJ 07410

Statement Ending 08/31/2024

Customer Number: 4608755

RETURN SERVICE REQUESTED

EMILY RAE VICENTE OR
BARBARA E KOMOR
134 ELBERT ST
RAMSEY NJ 07446-1406

Managing Your Accounts

Customer Service Center	800-522-4167
Website	Columbiabankonline.com
Mailing Address	19-01 Route 208 North Fair Lawn, NJ 07410

Summary of Accounts

Account Type	Account Number	Ending Balance
Cash Back	4608755	$559.14

Cash Back - 4608755

Account Summary

Date	Description	Amount
08/01/2024	**Beginning Balance**	**$243.73**
	10 Credit(s) This Period	$5,795.52
	10 Debit(s) This Period	$5,480.11
08/31/2024	**Ending Balance**	**$559.14**

Account Activity

Post Date	Description	Debits	Credits	Balance
08/01/2024	**Beginning Balance**			**$243.73**
08/03/2024	Deposit INTERNET TRANSFER FROM : XXXX8186		$150.00	$393.73
08/05/2024	External Deposit VENMO - CASHOUT		$40.00	$433.73
08/05/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$180.72		$253.01
08/07/2024	Deposit INTERNET TRANSFER FROM : XXXX8186		$100.00	$353.01
08/08/2024	NOW Deposit Zelle JOY S VICENTE 800-522-4167		$100.00	$453.01
08/08/2024	Deposit		$2,622.05	$3,075.06
08/08/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$96.26		$2,978.80
08/09/2024	External Deposit J298 SPH TRADI J298 00234SPH T00231 - Payroll		$1,059.98	$4,038.78
08/09/2024	Deposit INTERNET TRANSFER FROM : XXXX8186		$175.00	$4,213.78
08/09/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$198.13		$4,015.65
08/12/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$175.00		$3,840.65
08/12/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$1,000.00		$2,840.65
08/12/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$1,000.00		$1,840.65
08/13/2024	External Withdrawal 000042NEW HORIZN 0000042 T ROWE PRI - TRAN000042	$300.00		$1,540.65
08/15/2024	External Withdrawal VENMO - PAYMENT	$30.00		$1,510.65
08/16/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$1,200.00		$310.65
08/23/2024	External Deposit J298 SPH TRADI J298 00234SPH T00232 - Payroll		$1,059.98	$1,370.63

Cash Back - 4608755 (continued)

Account Activity (continued)

Post Date	Description	Debits	Credits	Balance
08/28/2024	Deposit INTERNET TRANSFER FROM : XXXX8186		$400.00	$1,770.63
08/29/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$1,300.00		$470.63
08/30/2024	External Deposit DFAS-CLEVELAND ZKA380500NET PAY - FED SALARY		$88.51	$559.14
08/31/2024	**Ending Balance**			**$559.14**

Overdraft and Returned Item Fees

	Total for this period	Total year-to-date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

NO.		
	$	
	$	
	$	
	$	
	$	
	$	
	$	
	$	
TOTAL	$	

THIS AREA IS PROVIDED TO HELP YOU BALANCE YOUR CHECKING ACCOUNT STATEMENT

If your Checking Account has overdraft protection, remember to record the dollar amount of funds transferred into your checking account from your other designated deposit account or from your Premium Overdraft or your CheckRight Overdraft Line of Credit.

Bank Balance Shown on this Statement

ADD+

Deposits not credited on this Statement (If Any)

SUBTOTAL

SUBTRACT-

Checks Outstanding

TOTAL

Should agree with checkbook balance after adding interest and deducting service charges (if any) shown on your checking statement. Please report any difference to us within10 days of receipt of this statement. If no difference is reported in 10 days, the account will be considered correct. Direct checking account inquires to the branch servicing it or to our customer service center at 1-800-522-4167.

IMPORTANT NOTICE

1. Always be alert to your surroundings and defer ATM transactions if circumstances cause you to be apprehensive.
2. Close the entry door of any ATM facility so equipped.
3. Put away withdrawn cash before exiting any ATM facility.
4. Direct any complaints concerning ATM security to an appropriate department of the owner of the ATM or to the NJ Department of Banking.
5. If you have any concerns about the security of any ATM owned and operated by Columbia Bank, call 1-800-522-4167 or the NJ Department of Banking at 609-292-7272.

LOST OR STOLEN DEBIT CARD

To report a lost or stolen Columbia Bank Debit Card, please call 800-522-4167, Monday through Friday from 7:30am - 8:00pm and Saturday, Sunday from 8:00am - 4:00 PM. After normal business hours, please call 800-472-3272.

THE FOLLOWING DISCLOSURE RELATES TO ACCOUNTS THAT CAN BE ACCESSED VIA ELECTRONIC FUND TRANSFERS

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUND TRANSFERS

Telephone us at 800-522-4167 (outside the Continental US call (201)796-3600) or write us at Columbia Bank, 19-01 Route 208 North, Fair Lawn, NJ 07410 ATTN: Customer Service Center, as soon as you can if you think your statement or receipt is wrong or if you need more information about a transfer or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number.
2. Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe there 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 the use of the money during the time it takes us to complete our investigation.

YOU MUST PUT YOUR COMPLAINT OR QUESTION IN WRITING EVEN IF YOU CALL. IF WE DO NOT RECEIVE IT WITHIN 10 BUSINESS DAYS OF RECEIPT OF THIS STATEMENT, WE MAY NOT CREDIT YOUR ACCOUNT.

IMPORTANT INFORMATION REGARDING YOUR OVERDRAFT PROTECTION LINE OF CREDIT STATEMENT

"PREV. BALANCE" and "PRIOR STATEMENT BALANCES" is the total unpaid principal at the beginning of the billing cycle. "NEW BALANCE" is the total unpaid principal at the end of the cycle.

Refer to the "TRANSACTION SECTION." The information within this section relates to the transactions that occurred during the statement cycle. Transactions shown in this section are the result of transactions affecting the loan. Transactions affecting the principal such as loans being made, the principal portion of payments received (if any), and other adjustments made. The principal balance from each of these figures is stated in the "PRINCIPAL" column. The principal balance remains unchanged between the dates of activity indicated.

The statement also totals fees assessed for the cycle and year-to-date. It also totals interest charged for the cycle and year-to-date.

Any payments received at other than the billing address may be subject to delays in posting.

The current interest rate is divided by 365 to arrive at the daily periodic rate. The daily periodic rate is multiplied by each of the different principal balances and then by the number of days each balance remained unchanged. The sum of these calculations equals the interest charge disclosed on the statement.

Send payment to:
Columbia Bank
P.O. Box 70402
Philadelphia, PA 19176-0402

Send billing inquiries to:
Columbia Bank
Attn: Loan Accounting Department
19-01 Route 208 North
Fair Lawn, NJ 07410

THE FOLLOWING DISCLOSURE REQUIRED BY FEDERAL LAW APPLIES TO OVERDRAFT PROTECTION LINE OF CREDIT ACCOUNTS. IT DOES NOT APPLY TO COMMERCIAL LINE OF CREDIT ACCOUNTS.

BILLING RIGHTS SUMMARY

What To Do If You Think You Find A Mistake On Your Statement

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- **Account information:** Your name and account number
- **Dollar Amount**
- **Description of Problem:** If you think there is an error on your bill, describe 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, the following are true:

- 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 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.

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Columbia Bank
19-01 Route 208 North • Fair Lawn, NJ 07410

Statement Ending 09/30/2024

Customer Number: 4608755

RETURN SERVICE REQUESTED

EMILY RAE VICENTE OR
BARBARA E KOMOR
134 ELBERT ST
RAMSEY NJ 07446-1406

Managing Your Accounts

Customer Service Center	800-522-4167
Website	Columbiabankonline.com
Mailing Address	19-01 Route 208 North Fair Lawn, NJ 07410

Summary of Accounts

Account Type	Account Number	Ending Balance
Cash Back	4608755	$946.51

Cash Back - 4608755

Account Summary

Date	Description	Amount
09/01/2024	**Beginning Balance**	**$559.14**
	9 Credit(s) This Period	$4,377.37
	8 Debit(s) This Period	$3,990.00
09/30/2024	**Ending Balance**	**$946.51**

Account Activity

Post Date	Description	Debits	Credits	Balance
09/01/2024	**Beginning Balance**			**$559.14**
09/03/2024	External Withdrawal VENMO - PAYMENT	$40.00		$519.14
09/03/2024	External Withdrawal 000042NEW HORIZN 0000042 T ROWE PRI - TRAN000042	$300.00		$219.14
09/04/2024	External Withdrawal CIGNA 877-484-59 - 8774845967	$50.00		$169.14
09/06/2024	External Deposit J298 SPH TRADI J298 00234SPH T00233 - Payroll		$1,059.98	$1,229.12
09/09/2024	External Deposit VENMO - CASHOUT		$200.00	$1,429.12
09/09/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$800.00		$629.12
09/11/2024	External Withdrawal 000042NEW HORIZN 0000042 T ROWE PRI - TRAN000042	$300.00		$329.12
09/13/2024	External Deposit DFAS-CLEVELAND ZKA380500NET PAY - FED SALARY		$165.95	$495.07
09/13/2024	Descriptive Deposit Mobile Retail Deposit		$504.88	$999.95
09/16/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$500.00		$499.95
09/19/2024	Deposit INTERNET TRANSFER FROM : XXXX8186		$800.00	$1,299.95
09/20/2024	External Deposit J298 SPH TRADI J298 00234SPH T00234 - Payroll		$1,059.97	$2,359.92
09/20/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$1,000.00		$1,359.92
09/21/2024	NOW Deposit Zelle JOY S VICENTE 800-522-4167		$150.00	$1,509.92
09/23/2024	External Withdrawal APPLECARD GSBANK - PAYMENT	$1,000.00		$509.92

Cash Back - 4608755 (continued)

Account Activity (continued)

Post Date	Description	Debits	Credits	Balance
09/27/2024	External Deposit DFAS-CLEVELAND ZKA380500NET PAY - FED SALARY		$286.59	$796.51
09/30/2024	Deposit INTERNET TRANSFER FROM : XXXX8186		$150.00	$946.51
09/30/2024	**Ending Balance**			**$946.51**

Overdraft and Returned Item Fees

	Total for this period	Total year-to-date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

NO.		
	$	
	$	
	$	
	$	
	$	
	$	
	$	
	$	
TOTAL	$	

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- We can apply any unpaid amount against your credit limit.

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T.RowePrice®
P.O. Box 17059 Baltimore, MD 21297-1083

Statements Enclosed

6356874 NX 3710 -C62-P00000-I

EMILY R. VICENTE
134 ELBERT ST
RAMSEY NJ 07446-1406

RETIREMENT ADVISORY SERVICE™

Partnering with you for your future.

Whether retirement is far away, fast approaching, or already here, now's a good time to seek to optimize your plan. Let us help you.

We'll begin by investing time in you, diving deep to understand what motivates you and what worries keep you up at night.

Based on your unique goals, a CERTIFIED FINANCIAL PLANNER™ professional will develop a complimentary, highly personalized financial plan for your household. You'll get advice that empowers your decisions and builds your confidence.

Retirement Advisory Service™ serves clients with $250,000 or more in household assets.

Explore advice | troweprice.com/getaplan | 1-866-269-6532

All investments are subject to market risk, including the possible loss of principal.

The T. Rowe Price Retirement Advisory Service™ is a nondiscretionary financial planning and retirement income planning service and a discretionary managed account program provided by T. Rowe Price Advisory Services, Inc., a registered investment adviser under the Investment Advisers Act of 1940. Brokerage accounts for the Retirement Advisory Service are provided by T. Rowe Price Investment Services, Inc., member FINRA/SIPC, and are carried by Pershing LLC, a BNY Mellon company, member NYSE/FINRA/SIPC, which acts as a clearing broker for T. Rowe Price Investment Services, Inc. T. Rowe Price Advisory Services, Inc., and T. Rowe Price Investment Services, Inc., are affiliated companies.

CCON0179543 202405-3458652

Mutual Fund Statement

Investor Number: J4AH6CU

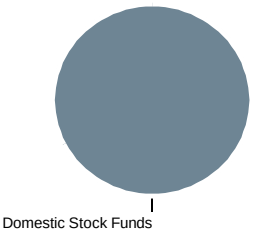
Mutual Fund Portfolio Value: $25,578.30

For any questions, please visit www.troweprice.com or call T. Rowe Price Investment Services Team at 1-800-225-5132.

ACTIVITY SUMMARY

	This Period	Year-To-Date[1]
Beginning Value	**$22,330.38**	**$19,070.33**
Additions	$2,100.00	$3,600.00
Deductions	$0.00	$0.00
Income	$0.00	$0.00
Market Fluctuation[2]	$1,147.92	$2,907.97
Net Change	**$3,247.92**	**$6,507.97**
Ending Value	**$25,578.30**	**$25,578.30**

ASSET ALLOCATION



100.00% Stock Funds	**$25,578.30**
100.00% Domestic	$25,578.30

INCOME SUMMARY

	This Period	Year-To-Date[1]
Tax-deferred	$0.00	$0.00
Taxable	$0.00	$0.00
Total	**$0.00**	**$0.00**

[1] Year-to-date income may include closed accounts no longer shown on this statement.

[2] "Market Fluctuation" reflects any increase or decrease in fund share prices since your last statement. It does not reflect a fund's payment of dividends and interest or any reinvestment of dividends and interest into your account. If all of your holdings are in retail or government money market funds, generally there should be no change in account value or principal due to market fluctuation.

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Mutual Fund Statement

Investor Number: J4AH6CU

PORTFOLIO OVERVIEW

	06/30/24 Value	09/30/24 Value	Change in Value	% of Assets
Rollover IRA	**$22,330.38**	**$25,578.30**	**$3,247.92**	**100.00%**
Emily R. Vicente-Owner	$22,330.38	$25,578.30	$3,247.92	100.00%
BLUE CHIP GROWTH	$9,040.66	$10,004.95	$964.29	39.12%
MID-CAP GROWTH	$7,184.32	$8,338.33	$1,154.01	32.60%
NEW HORIZONS	$6,105.40	$7,235.02	$1,129.62	28.29%

MUTUAL FUND TRANSACTION ACTIVITY

BLUE CHIP GROWTH

T. Rowe Price Trust Co Cust For
Rollover IRA
Emily R. Vicente-Owner

Account No.: 9300087949
Tele* Access Code: 50
Ticker Symbol: TRBCX

Date	Activity	Shares	Share Price	Net Amount
6/30	**Beginning Balance**	**48.478**	**$186.4900**	**$9,040.66**
7/1	2024 CONTRIBUTION -ACH	0.532	$187.8900	$100.00
7/10	2024 CONTRIBUTION -ACH	0.514	$194.6800	$100.00
7/30	2024 CONTRIBUTION -ACH	0.564	$177.3500	$100.00
8/12	2024 CONTRIBUTION -ACH	0.565	$177.0800	$100.00
8/30	2024 CONTRIBUTION -ACH	0.536	$186.4100	$100.00
9/10	2024 CONTRIBUTION -ACH	0.556	$179.9700	$100.00
9/30	2024 CONTRIBUTION -ACH	0.522	$191.4200	$100.00
9/30	**Ending Balance**	**52.267**	**$191.4200**	**$10,004.95**

Year-to-Date Information

Tax-Deferred Dividends	$0.00
Tax-Deferred Long-Term Gains	$0.00
Tax-Deferred Short-Term Gains	$0.00
Additions	$1,200.00
Deductions	$0.00

MID-CAP GROWTH

T. Rowe Price Trust Co Cust For
Rollover IRA
Emily R. Vicente-Owner

Account No.: 6400041950
Tele* Access Code: 47
Ticker Symbol: RPMGX

Date	Activity	Shares	Share Price	Net Amount
6/30	**Beginning Balance**	**69.407**	**$103.5100**	**$7,184.32**
7/1	2024 CONTRIBUTION -ACH	0.973	$102.7700	$100.00

continues

MUTUAL FUND TRANSACTION ACTIVITY continued

MID-CAP GROWTH

T. Rowe Price Trust Co Cust For
Rollover IRA
Emily R. Vicente-Owner

Account No.: 6400041950
Tele* Access Code: 47
Ticker Symbol: RPMGX

Date	Activity	Shares	Share Price	Net Amount
7/10	2024 CONTRIBUTION -ACH	0.964	$103.7700	$100.00
7/30	2024 CONTRIBUTION -ACH	0.944	$105.9300	$100.00
8/12	2024 CONTRIBUTION -ACH	0.973	$102.7600	$100.00
8/30	2024 CONTRIBUTION -ACH	0.923	$108.3800	$100.00
9/10	2024 CONTRIBUTION -ACH	0.949	$105.4200	$100.00
9/30	2024 CONTRIBUTION -ACH	0.912	$109.6500	$100.00
9/30	**Ending Balance**	**76.045**	**$109.6500**	**$8,338.33**

Year-to-Date Information

Tax-Deferred Dividends	$0.00
Tax-Deferred Long-Term Gains	$0.00
Tax-Deferred Short-Term Gains	$0.00
Additions	$1,200.00
Deductions	$0.00

NEW HORIZONS

T. Rowe Price Trust Co Cust For
Rollover IRA
Emily R. Vicente-Owner

Account No.: 4200044082
Tele* Access Code: 32
Ticker Symbol: PRNHX

Date	Activity	Shares	Share Price	Net Amount
6/30	**Beginning Balance**	**111.964**	**$54.5300**	**$6,105.40**
7/1	2024 CONTRIBUTION -ACH	1.844	$54.2300	$100.00
7/10	2024 CONTRIBUTION -ACH	1.829	$54.6600	$100.00
7/30	2024 CONTRIBUTION -ACH	1.769	$56.5400	$100.00
8/12	2024 CONTRIBUTION -ACH	1.849	$54.0700	$100.00
8/30	2024 CONTRIBUTION -ACH	1.746	$57.2800	$100.00
9/10	2024 CONTRIBUTION -ACH	1.805	$55.4000	$100.00
9/30	2024 CONTRIBUTION -ACH	1.721	$58.1000	$100.00
9/30	**Ending Balance**	**124.527**	**$58.1000**	**$7,235.02**

continues

MUTUAL FUND TRANSACTION ACTIVITY

continued

Year-to-Date Information	
Tax-Deferred Dividends	$0.00
Tax-Deferred Long-Term Gains	$0.00
Tax-Deferred Short-Term Gains	$0.00
Additions	$1,200.00
Deductions	$0.00

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About Your Account and Statement

CONTACT T. ROWE PRICE

Website
www.troweprice.com

Mobile App
Text MOBILEAPP to 68784 to download our mobile app

Facebook
www.facebook.com/TRowePrice

Twitter
www.twitter.com/TRowePrice

Email
info@troweprice.com

Telephone Numbers
Mutual Funds
1-800-225-5132

*Tele*Access®*
1-800-638-2587

T. Rowe Price Brokerage
1-800-225-7720

Small Business Retirement Plans Retirement Client Services
1-800-492-7670

Mailing Address
T. Rowe Price
P.O. Box 17302
Baltimore, MD 21297-1302

Servicing Your Account
To view and update your account, log in to your account on our secure website at **www.troweprice.com/access**. Update your personal information, including enrollment in the paperless program and other services, within the "Profile" section. To activate your T. Rowe Price mutual fund and brokerage accounts online, visit **www.troweprice.com/activate**. For additional assistance, call 1-800-225-5132.

Activity Summary
This section summarizes the activity across all of your accounts for the statement period and year-to-date. "Additions" and "Deductions" comprise any transactions to move money into or out of your account(s), including purchases or redemptions, exchanges into or from a fund, transfers to or from other accounts, or checkwriting activity.

"Income" comprises any proceeds (cash or reinvested dividends and short- and long-term capital gains distributions) earned from your accounts. Proceeds from income that is not reinvested in the same account (cash dividends paid to you and dividends invested into another account) is also reflected as a deduction.

"Market Fluctuation" reflects any increase or decrease in fund share prices since your last statement. It does not reflect a fund's payment of dividends and interest or any reinvestment of dividends and interest into your account. If all of your holdings are in retail or government money market funds, generally there should be no change in account value or principal due to market fluctuation.

Income Summary: Taxable, Tax-Free, and Tax-Deferred
Summary amounts are estimates provided as a convenience for tax-planning purposes. To report taxable and tax-free income on your tax return, always wait to receive IRS Form 1099-DIV, for taxable income (dividends and capital gain distributions) and exempt-interest dividends, and Form 1099-B, for reporting the sale of securities and mutual fund shares, before completing your tax return. These forms are mailed in late January with some exceptions. A fund's taxable income occasionally is reclassified, so amounts shown on your statement summaries may not match those on the official tax document.

Asset Allocation Chart
To help you track your investment allocations and monitor diversification, this chart shows the types of securities or funds you own as a percent of your total account.

Cost Basis Information
IRS tax reporting regulations separate securities into covered shares and noncovered shares. When redeeming shares that are subject to reporting on Form 1099-B, T. Rowe Price generally will dispose of all noncovered shares first and then the covered shares, in each case in accordance with the cost basis method on your account to the extent possible. For example, if your account method is Average Cost or First In First Out, T. Rowe Price will dispose of all noncovered shares before disposing of covered shares; in each case, noncovered shares will be disposed in a First In First Out order. If you choose to specify individual lots at the time of redemption, we will deplete the shares in accordance with your specification to the extent possible. The designated depletion order will be used to report the tax information for the sale of covered and noncovered shares on Form 1099-B. For more information on tax lots disposed, cost basis method, covered and noncovered shares, or the regulation applicable to cost basis reporting, please visit **www.troweprice.com/costbasis** or contact a T. Rowe Price Associate or your financial or tax advisor.

Average Cost Per Share
We use the average cost method as the default cost basis method for covered mutual fund shares. We also provide average cost information for noncovered mutual fund shares if the information is available. The average costs for covered shares and noncovered shares are calculated separately because IRS regulations require that covered and noncovered shares are treated as held in separate accounts. To calculate the average cost of your T. Rowe Price mutual fund shares, we include reinvested dividends (except for the month just closed) and capital gains distributions, purchases by exchange from another fund, and all other purchases and prior sales. We also adjust for any wash sales, returns of capital, and stock splits.

We may not show your average cost for the following reasons:

1. We may lack cost basis if: the account was opened prior to 1/1/1993; noncovered shares were inherited or given to you; or shares were received via transfer from another T. Rowe Price account or another investment manager without the cost basis information. If you provide your cost basis for noncovered shares on our Cost Basis Change Form, we can report average cost per share to you in the future and also calculate your gains/losses on share redemptions for your convenience.
2. Average cost is provided only where applicable; it's not provided for money market or tax-deferred retirement accounts.

Texas Residents - Designation of Representative for Abandoned Property Notice
The following applies to all accounts EXCEPT accounts in plans covered by ERISA. You have the right to designate a representative to receive unclaimed property notices. To designate a representative, please fill out the form provided by the state comptroller and mail it to T. Rowe Price at the address referenced on the left side of the page. The form can be viewed and downloaded by visiting **www.claimittexas.org**.

Abandoned Property
If your account has no activity for a certain period of time, or you haven't logged in to your account online, made contact with us for two or more years, or mail sent to you from T. Rowe Price is deemed undeliverable, T. Rowe Price may be required to transfer (i.e., escheat) your account assets, including any assets related to uncashed checks, to the appropriate state under that state's abandoned property laws. To avoid a transfer of your assets to the state, it is important to keep your account address up to date and periodically communicate with T. Rowe Price by contacting us or by logging in to your account at **www.troweprice.com/access** at least once every two years. See the prospectus for more information regarding the escheatment of assets held in IRAs.

About Your Mutual Fund Account
T. Rowe Price Fund accounts are maintained and serviced by T. Rowe Price Services, Inc. The net asset value or share price of each T. Rowe Price mutual fund is calculated by T. Rowe Price Associates, Inc., or its agent. The Annualized 30-day dividend yield represents the average daily dividends for the 30-day period, annualized and divided by the net asset values per share at the end of the period.
For more information, consult your T. Rowe Price Fund prospectus. The time of the transactions listed on this statement will be furnished to you upon written request. The principal underwriter for T. Rowe Price mutual funds is T. Rowe Price Investment Services, Inc.

Request a prospectus or summary prospectus; each includes investment objectives, risks, fees, expenses, and other information that you should read and consider carefully before investing.

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