



P.O. Box 241826  
Omaha, NE 68124

RETURN SERVICE REQUESTED

CITY OF SHANIKO  
PO BOX 17  
SHANIKO OR 97057-0017

## Statement Ending 02/28/2023

CITY OF SHANIKO

Page 1 of 4

Account Number: XXXXXXXXXXXX8485

### Managing Your Accounts



Client Contact  
Center

855-342-3400



Website

firstinterstate.com

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### Summary of Accounts



Account Type	Account Number	Ending Balance
CLASSIC BUSINESS CHECKING	XXXXXXXXXXXX8485	\$21,703.78

(Rev. July 2014)

CLASSIC BUSINESS CHECKING-XXXXXXXXXX8485

Account Summary

Date	Description	Amount
02/01/2023	Beginning Balance	\$20,175.19
	1 Credit(s) This Period	\$3,432.46
	11 Debit(s) This Period	\$1,903.87
02/28/2023	Ending Balance	\$21,703.78

Account Activity

Post Date	Description	Debits	Credits	Balance
02/01/2023	Beginning Balance			\$20,175.19
02/01/2023	DEPOSIT		\$3,432.46	\$23,607.65
02/01/2023	CHECK # 2335	\$150.00		\$23,457.65
02/07/2023	XX3386 DEBIT CARD 02/06 08:45 INTUIT * QBooks O CL.INTUIT.COM CA 90798047 218957	\$42.50		\$23,415.15
02/08/2023	LOC LEAGUE OF OR SALEM OR 66381668 384502 XX3386 DEBIT CARD 02/06 12:14	\$59.00		\$23,356.15
02/15/2023	CONSUMER CELLULA 106164150 OR 31758424 016200 XX3386 DEBIT CARD 02/15 03:25	\$18.90		\$23,337.25
02/15/2023	PSN* WASCO ELECTR 866-917-7368 OR 70385865 229325 XX3386 DEBIT CARD 02/14 15:09	\$896.02		\$22,441.23
02/21/2023	XX3386 DEBIT CARD 02/19 01:34 MSFT * E0400M46H MSBILL.INFO WA 00789077 347136	\$6.00		\$22,435.23
02/21/2023	CHECK # 2342	\$180.00		\$22,255.23
02/21/2023	CHECK # 2343	\$385.39		\$21,869.84
02/22/2023	Amazon.com* HP7SJ Amzn.com/bill WA 14502920 910903 XX3386 DEBIT CARD 02/21 02:18	\$28.77		\$21,841.07
02/27/2023	CHECK # 2341	\$134.50		\$21,706.57
02/28/2023	CHECK # 2340	\$2.79		\$21,703.78
02/28/2023	Ending Balance			\$21,703.78

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
2335	02/01/2023	\$150.00	2341	02/27/2023	\$134.50	2343	02/21/2023	\$385.39
2340*	02/28/2023	\$2.79	2342	02/21/2023	\$180.00			

\* Indicates skipped check number

Daily Balances

Date	Amount	Date	Amount	Date	Amount
02/01/2023	\$23,457.65	02/15/2023	\$22,441.23	02/27/2023	\$21,706.57
02/07/2023	\$23,415.15	02/21/2023	\$21,869.84	02/28/2023	\$21,703.78
02/08/2023	\$23,356.15	02/22/2023	\$21,841.07		

Overdraft and Returned Item Fees

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

**First Interstate**  
CHECKING DEPOSIT

DATE 11/30/2023 CASH 337.32  
DEPOSIT TO ACCOUNT NUMBER 1020.00  
D031018485 CHECKS ON TOTAL 1.52  
NAME City of Shaniko SUB TOTAL 2073.82  
NET DEPOSIT \$ 3432.46

MEMORANDUM FOR CASH RECEIPTS IF REQUIRED IN FULL PRESENCE  
OF THE PAYEE (NAME AND ADDRESS) FOR USE ONLY BY THE  
BANK OF THE UNITED STATES OF AMERICA

#000000000 02/01 \$3,432.46

CITY OF SHANIKO  
C/O Box 17  
Shaniko, Oregon 97627

DATE 11/30/2023 CASH \$150.00  
NAME Shaniko  
MEMORANDUM FOR CASH RECEIPTS IF REQUIRED IN FULL PRESENCE  
OF THE PAYEE (NAME AND ADDRESS) FOR USE ONLY BY THE  
BANK OF THE UNITED STATES OF AMERICA

#000002335 02/01 \$150.00

CITY OF SHANIKO  
C/O Box 17  
Shaniko, Oregon 97627

DATE 2/12/2023 CASH \$2.79  
NAME Pace Propane  
MEMORANDUM FOR CASH RECEIPTS IF REQUIRED IN FULL PRESENCE  
OF THE PAYEE (NAME AND ADDRESS) FOR USE ONLY BY THE  
BANK OF THE UNITED STATES OF AMERICA

#000002340 02/28 \$2.79

CITY OF SHANIKO  
C/O Box 17  
Shaniko, Oregon 97627

DATE 2/13/2023 CASH \$134.50  
NAME Rox R. Water Analysis Lab  
MEMORANDUM FOR CASH RECEIPTS IF REQUIRED IN FULL PRESENCE  
OF THE PAYEE (NAME AND ADDRESS) FOR USE ONLY BY THE  
BANK OF THE UNITED STATES OF AMERICA

#000002341 02/27 \$134.50

CITY OF SHANIKO  
C/O Box 17  
Shaniko, Oregon 97627

DATE 2/13/2023 CASH \$180.00  
NAME Madras Sanitary Service  
MEMORANDUM FOR CASH RECEIPTS IF REQUIRED IN FULL PRESENCE  
OF THE PAYEE (NAME AND ADDRESS) FOR USE ONLY BY THE  
BANK OF THE UNITED STATES OF AMERICA

#000002342 02/21 \$180.00

CITY OF SHANIKO  
C/O Box 17  
Shaniko, Oregon 97627

DATE 2/13/2023 CASH \$385.39  
NAME Laif  
MEMORANDUM FOR CASH RECEIPTS IF REQUIRED IN FULL PRESENCE  
OF THE PAYEE (NAME AND ADDRESS) FOR USE ONLY BY THE  
BANK OF THE UNITED STATES OF AMERICA

#000002343 02/21 \$385.39