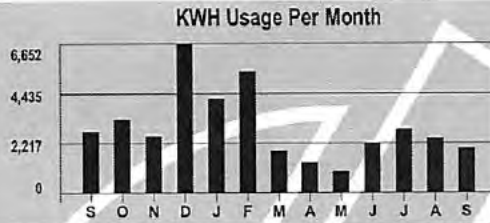


EXHIBIT 93

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 902
 Days of Service: 23



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
09/06/19	09/23/19	08/13/19	09/05/19		48925	50908	1	1983

Explanation of Charges


PREVIOUS AMOUNT DUE	249.00
THANK YOU FOR YOUR PAYMENT 08/30/19	-249.00
RESIDENTIAL CHARGES	200.80
MEMBER FEE	-5.00
CURRENT ELECTRIC CHARGES	195.80
TOTAL AMOUNT DUE	195.80

*** CLOSING BILL ***

Need assistance with your electric bill? Contact Catholic Charities at 855-847-0555 for more information.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$5.94


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	195.80
DELINQUENT AFTER:	09/23/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



Outside Payment Kiosk

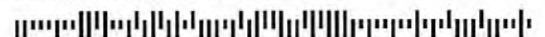
*****AUTO**ALL FOR AADC 365



PALAZZO STEVEN 3
 PO BOX 6217 473
 GULFPORT MS 39506-6217

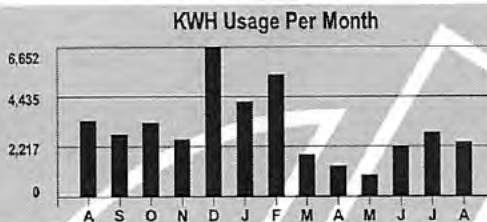


COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869001 8 0000000000 000019580 000019580 1

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 31



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
08/15/19	08/30/19	07/13/19	08/13/19		46502	48925	1	2423


Explanation of Charges

PREVIOUS AMOUNT DUE	284.00
THANK YOU FOR YOUR PAYMENT 07/29/19	-284.00
RESIDENTIAL CHARGES	248.61
CURRENT ELECTRIC CHARGES	248.61
OPERATION ROUND UP	0.39
TOTAL AMOUNT DUE	249.00

Need assistance with your electric bill? Contact Catholic Charities at 855-847-0555 for more information.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$7.26


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

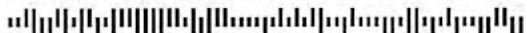
Member Number:	[REDACTED]
Account Balance	249.00
DELINQUENT AFTER:	08/30/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



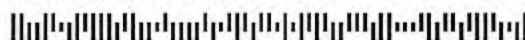
Outside Payment Kiosk

*****AUTO**ALL FOR AADC 365



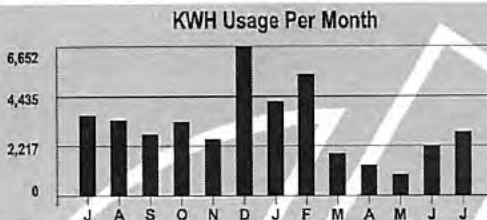
PALAZZO STEVEN 14
 PO BOX 6217 3063
 GULFPORT MS 39506-6217

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869001 & 0000000000 000024900 000025550 7

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 30



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
07/16/19	07/31/19	06/13/19	07/13/19		43673	46502	1	2829


Explanation of Charges

PREVIOUS AMOUNT DUE	231.00
THANK YOU FOR YOUR PAYMENT 06/28/19	-231.00
RESIDENTIAL CHARGES	283.27
CURRENT ELECTRIC CHARGES	283.27
OPERATION ROUND UP	0.73
TOTAL AMOUNT DUE	284.00

Need assistance with your electric bill? Contact Catholic Charities at 855-847-0555 for more information.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$8.48


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

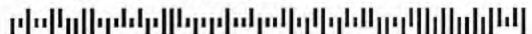
Member Number:	[REDACTED]
Account Balance	284.00
DELINQUENT AFTER:	07/31/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



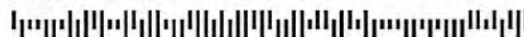
Outside Payment Kiosk

*****AUTO**ALL FOR AADC 365



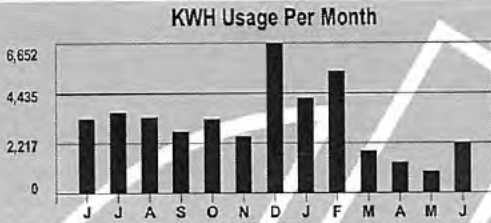
PALAZZO STEVEN 13
 PO BOX 6217 3030
 GULFPORT MS 39506-6217

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869001 & 0000000000 000028400 000029050 0

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 31




BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
06/14/19	07/01/19	05/13/19	06/13/19		41451	43673	1	2222

Explanation of Charges

PREVIOUS AMOUNT DUE	118.00
THANK YOU FOR YOUR PAYMENT 05/31/19	-118.00
RESIDENTIAL CHARGES	230.90
CURRENT ELECTRIC CHARGES	230.90
OPERATION ROUND UP	0.10
TOTAL AMOUNT DUE	231.00

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$6.66


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	231.00
DELINQUENT AFTER:	07/01/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



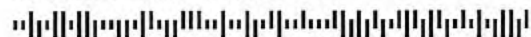
Outside Payment Kiosk

*****AUTO**ALL FOR AADC 365



PALAZZO STEVEN 14
 PO BOX 6217 3041
 GULFPORT MS 39506-6217

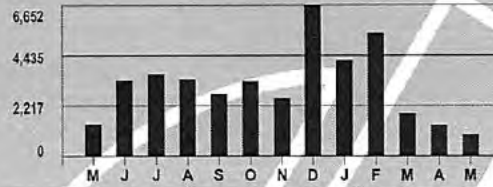
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



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Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 30

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
05/14/19	05/29/19	04/13/19	05/13/19		40500	41451	1	951

Explanation of Charges

PREVIOUS AMOUNT DUE	157.00
THANK YOU FOR YOUR PAYMENT 05/01/19	-157.00
RESIDENTIAL CHARGES	117.73
CURRENT ELECTRIC CHARGES	117.73
OPERATION ROUND UP	0.27
TOTAL AMOUNT DUE	118.00

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$2.85

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	118.00
DELINQUENT AFTER:	05/29/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



*****AUTO**ALL FOR AADC 365



PALAZZO STEVEN 13
 PO BOX 6217 3050
 GULFPORT MS 39506-6217

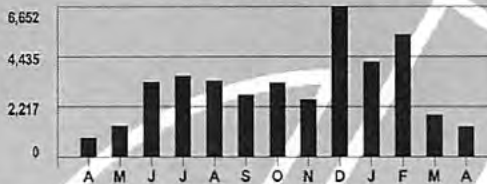


COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 31

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
04/15/19	04/29/19	03/13/19	04/13/19		39127	40500	1	1373

Explanation of Charges

PREVIOUS AMOUNT DUE	789.00
THANK YOU FOR YOUR PAYMENT 04/08/19	-789.00
RESIDENTIAL CHARGES	156.06
CURRENT ELECTRIC CHARGES	156.06
OPERATION ROUND UP	0.94
TOTAL AMOUNT DUE	157.00

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$4.11

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	157.00
DELINQUENT AFTER:	04/29/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



Outside Payment Kiosk

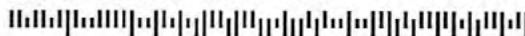
*****AUTO**ALL FOR AADC 365



PALAZZO STEVEN 13
 PO BOX 6217 3061
 GULFPORT MS 39506-6217



COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340

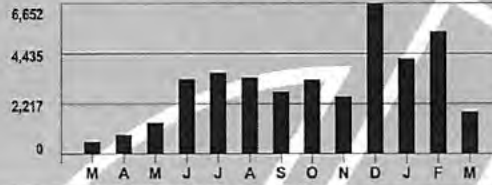


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Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 29

KWH Usage Per Month

3310



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
03/14/19	03/28/19	02/12/19	03/13/19		37249	39127	1	1878

Explanation of Charges

PREVIOUS UNPAID BALANCE	565.00
RESIDENTIAL CHARGES	216.63
LATE CHARGE	6.50
CURRENT ELECTRIC CHARGES	223.13
OPERATION ROUND UP	0.87
TOTAL AMOUNT DUE	789.00

***** Disconnect-Notice *****

To avoid disconnection of service, this bill must be paid immediately. (Partial payment or a scheduled payment past the due date will not prevent service interruption). If your service is disconnected for non-payment, you will be required to pay disconnect/reconnect fees and the necessary amount to bring the total deposit up to 2 1/2 months average bill or \$300 (whichever is greater). The amount will be billed and payable prior to service reconnection. Please pay by phone at 877-769-2372 or online at www.coastepa.com

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$5.63

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

DISCONNECT NOTICE

Member Number:	[REDACTED]
Account Balance	789.00
DELINQUENT AFTER:	Subject to disconnect

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



Outside Payment Kiosk

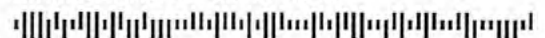
*****AUTO**ALL FOR AADC 365



PALAZZO STEVEN 14
 PO BOX 6217 3038
 GULFPORT MS 39506-6217



COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



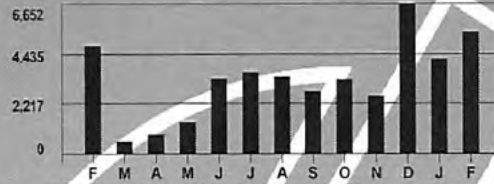
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20-2124_1686

CE_0055

Member Number:
 Web Account Number:
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 31

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
02/14/19	02/28/19	01/12/19	02/12/19		31837	37249	1	5412

Explanation of Charges

PREVIOUS AMOUNT DUE	451.00
THANK YOU FOR YOUR PAYMENT 02/07/19	-451.00
RESIDENTIAL CHARGES	564.90
CURRENT ELECTRIC CHARGES	564.90
OPERATION ROUND UP	0.10
TOTAL AMOUNT DUE	565.00

Download Coast Electric's FREE mobile app to have account information in the palm of your hand. Pay your bill, view our outage map and more!

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$16.23

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07280R



Please detach & return with payment

A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	33869-001
Account Balance	565.00
DELINQUENT AFTER:	02/28/19

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



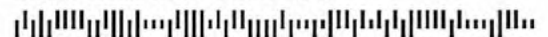
Outside Payment Kiosk

*****AUTO**ALL FOR AADC 365



PALAZZO STEVEN 3022 13
 PO BOX 6217
 GULFPORT MS 39506-6217

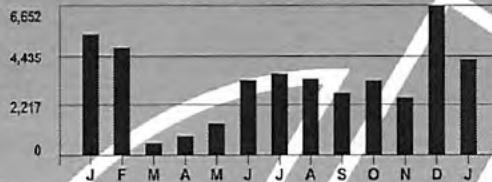
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



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Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 31

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
01/14/19	01/28/19	12/12/18	01/12/19		27598	31837	1	4239


Explanation of Charges

PREVIOUS AMOUNT DUE	692.00
THANK YOU FOR YOUR PAYMENT 12/28/18	-692.00
RESIDENTIAL CHARGES	450.05
CURRENT ELECTRIC CHARGES	450.05
SHARE YOUR BLESSINGS	0.95
TOTAL AMOUNT DUE	451.00

NOTICE: The board made amendments to CEPA's Bylaws including requiring mandatory Arbitration unless otherwise rejected. Go to Coastepa.com, call or visit an office to obtain a copy

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$12.71


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy* Cooperative 

MS07260R



Please detach & return with payment

A Touchstone Energy* Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

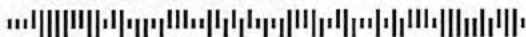
Member Number:	[REDACTED]
Account Balance	451.00
DELINQUENT AFTER:	01/28/19

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



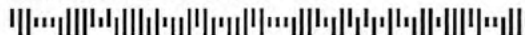
Outside Payment Kiosk

*****AUTO**ALL FOR AADC 365



PALAZZO STEVEN 5929 25
 PO BOX 6217
 GULFPORT MS 39506-6217

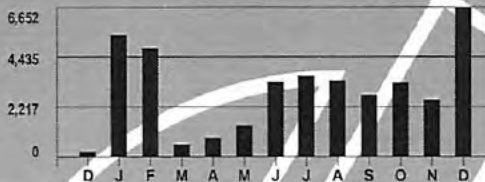
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



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Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 30

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
12/14/18	12/28/18	11/12/18	12/12/18		20946	27598	1	6652

Explanation of Charges

PREVIOUS AMOUNT DUE	286.34
THANK YOU FOR YOUR PAYMENT 11/29/18	-286.34
RESIDENTIAL CHARGES	691.55
CURRENT ELECTRIC CHARGES	691.55
SHARE YOUR BLESSINGS	0.45
TOTAL AMOUNT DUE	692.00

NOTICE: The board made amendments to CEPA's Bylaws including requiring mandatory Arbitration unless otherwise rejected. Go to Coastepa.com, call or visit an office to obtain a copy

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$19.95

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07260R



Please detach & return with payment

A Touchstone Energy® Cooperative

P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	692.00
DELINQUENT AFTER:	12/28/18

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



Outside Payment Kiosk

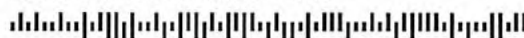
*****AUTO**ALL FOR AADC 365



PALAZZO STEVEN
 PO BOX 6217
 GULFPORT MS 39506-6217

3111 14

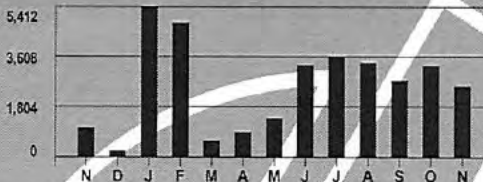
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869001 8 0000000000 000069200 000069850 3

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072
 Meter Serial Number: 5000047362
 Route: 28
 Days of Service: 31

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
11/15/18	11/29/18	10/12/18	11/12/18		18404	20946	1	2542


Explanation of Charges

PREVIOUS AMOUNT DUE	325.38
THANK YOU FOR YOUR PAYMENT 11/01/18	-325.38
RESIDENTIAL CHARGES	286.34
CURRENT ELECTRIC CHARGES	286.34
TOTAL AMOUNT DUE	286.34

Download Coast Electric's FREE mobile app to have account information in the palm of your hand. Pay your bill, view our outage map and more.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$7.62


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy* Cooperative 

MS07280R



Please detach & return with payment

A Touchstone Energy* Cooperative 

P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	286.34
DELINQUENT AFTER:	11/29/18

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



Outside Payment Kiosk

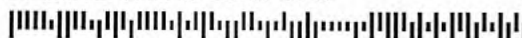
*****AUTO**ALL FOR AADC 365



PALAZZO STEVEN
 PO BOX 6217
 GULFPORT MS 39506-6217

5787 23

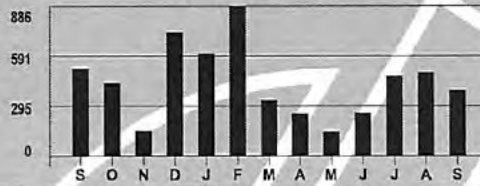
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869001 8 0000000000 000028634 000029284 3

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 902
 Days of Service: 23

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
09/06/19	09/23/19	08/13/19	09/05/19		44860	45247	1	387

Explanation of Charges

PREVIOUS AMOUNT DUE	79.00	
THANK YOU FOR YOUR PAYMENT 08/30/19	-79.00	*** CLOSING BILL ***
RESIDENTIAL CHARGES	60.10	
MEMBER FEE	-5.00	
CURRENT ELECTRIC CHARGES	55.10	
TOTAL AMOUNT DUE	55.10	

Need assistance with your electric bill? Contact Catholic Charities at 855-847-0555 for more information.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$1.16

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

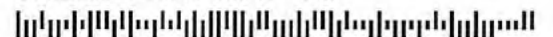
Member Number:	[REDACTED]
Account Balance	55.10
DELINQUENT AFTER:	09/23/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



PALAZZO STEVEN 3
 PO BOX 6217 473
 GULFPORT MS 39506-6217

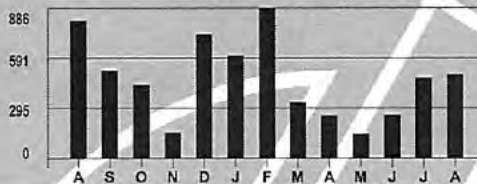
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869002 6 0000000000 000005510 000005510 7

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 31

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
08/15/19	08/30/19	07/13/19	08/13/19		44367	44860	1	493

Explanation of Charges

PREVIOUS AMOUNT DUE	76.00
THANK YOU FOR YOUR PAYMENT 07/29/19	-76.00
RESIDENTIAL CHARGES	78.49
CURRENT ELECTRIC CHARGES	78.49
OPERATION ROUND UP	0.51
TOTAL AMOUNT DUE	79.00

Need assistance with your electric bill? Contact Catholic Charities at 855-847-0555 for more information.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$1.47

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

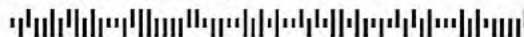
Member Number:	[REDACTED]
Account Balance	79.00
DELINQUENT AFTER:	08/30/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



14
 PALAZZO STEVEN 3063
 PO BOX 6217
 GULFPORT MS 39506-6217

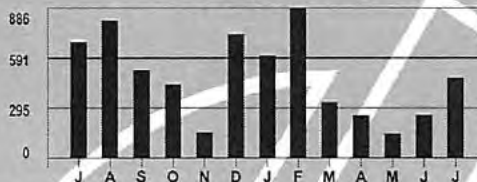
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869002 6 0000000000 000007900 000008550 4

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 30

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
07/16/19	07/31/19	06/13/19	07/13/19		43894	44367	1	473


Explanation of Charges

PREVIOUS AMOUNT DUE	58.00
THANK YOU FOR YOUR PAYMENT 06/28/19	-58.00
RESIDENTIAL CHARGES	75.59
CURRENT ELECTRIC CHARGES	75.59
OPERATION ROUND UP	0.41
TOTAL AMOUNT DUE	76.00

Need assistance with your electric bill? Contact Catholic Charities at 855-847-0555 for more information.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$1.41


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative 

P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

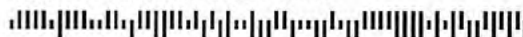
Member Number:	[REDACTED]
Account Balance	76.00
DELINQUENT AFTER:	07/31/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



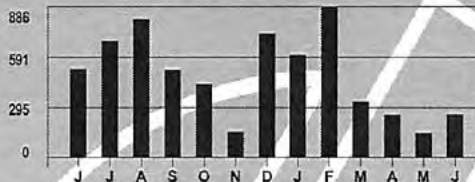

 PALAZZO STEVEN 13
 PO BOX 6217 3030
 GULFPORT MS 39506-6217

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 31

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
06/14/19	07/01/19	05/13/19	06/13/19		43636	43894	1	258

Explanation of Charges

PREVIOUS AMOUNT DUE	47.00
THANK YOU FOR YOUR PAYMENT 05/31/19	-47.00
RESIDENTIAL CHARGES	57.77
CURRENT ELECTRIC CHARGES	57.77
OPERATION ROUND UP	0.23
TOTAL AMOUNT DUE	58.00

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$0.77

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	58.00
DELINQUENT AFTER:	07/01/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.

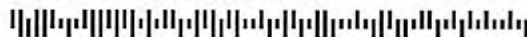


Outside Payment Kiosk

PALAZZO STEVEN 14
 PO BOX 6217 3041
 GULFPORT MS 39506-6217

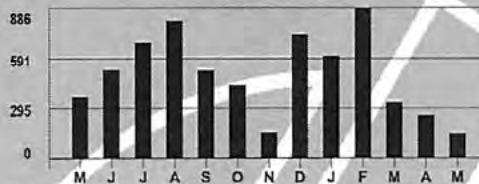


COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 30

KWH Usage Per Month




BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
05/14/19	05/29/19	04/13/19	05/13/19		43489	43636	1	147

Explanation of Charges

PREVIOUS AMOUNT DUE	58.00
THANK YOU FOR YOUR PAYMENT 05/01/19	-58.00
RESIDENTIAL CHARGES	46.85
CURRENT ELECTRIC CHARGES	46.85
OPERATION ROUND UP	0.15
TOTAL AMOUNT DUE	47.00

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$0.44


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	47.00
DELINQUENT AFTER:	05/29/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.




 PALAZZO STEVEN 13
 PO BOX 6217 3050
 GULFPORT MS 39506-6217

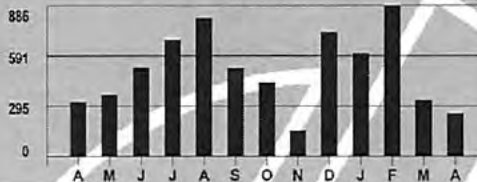
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



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Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 31

KWH Usage Per Month




BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
04/15/19	04/29/19	03/13/19	04/13/19		43236	43489	1	253

Explanation of Charges

PREVIOUS AMOUNT DUE	194.00
THANK YOU FOR YOUR PAYMENT 04/08/19	-194.00
RESIDENTIAL CHARGES	57.33
CURRENT ELECTRIC CHARGES	57.33
OPERATION ROUND UP	0.67
TOTAL AMOUNT DUE	58.00

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$0.75


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280F



Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	58.00
DELINQUENT AFTER:	04/29/19

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



Outside Payment Kiosk



PALAZZO STEVEN 13
 PO BOX 6217 3061
 GULFPORT MS 39506-6217

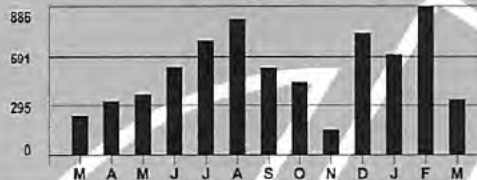
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869002 6 0000000000 000005800 000006450 3

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 29

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
03/14/19	03/28/19	02/12/19	03/13/19		42904	43236	1	332

Explanation of Charges

PREVIOUS UNPAID BALANCE	122.00
RESIDENTIAL CHARGES	65.28
LATE CHARGE	6.50
CURRENT ELECTRIC CHARGES	71.78
OPERATION ROUND UP	0.22
TOTAL AMOUNT DUE	194.00

As a member of an electric cooperative, you build ownership in Coast Electric. Capital credits are just one of many benefits of belonging to an electric cooperative. Your capital allocation for 2018 is presented below.


\$385.15

**** Disconnect-Notice ****

To avoid disconnection of service, this bill must be paid immediately. (Partial payment or a scheduled payment past the due date will not prevent service interruption). If your service is disconnected for non-payment, you will be required to pay disconnect/reconnect fees and the necessary amount to bring the total deposit up to 2 1/2 months average bill or \$300 (whichever is greater). The amount will be billed and payable prior to service reconnection. Please pay by phone at 877-769-2372 or online at www.coastepa.com


Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$0.99

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 



Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

DISCONNECT NOTICE

MS07280F

Member Number:	[REDACTED]
Account Balance	194.00
DELINQUENT AFTER:	Subject to disconnect

To change your address, phone number or to learn more about Operation Round Up, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



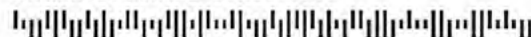
Outside Payment Kiosk



PALAZZO STEVEN 14
 PO BOX 6217 3038
 GULFPORT MS 39506-6217



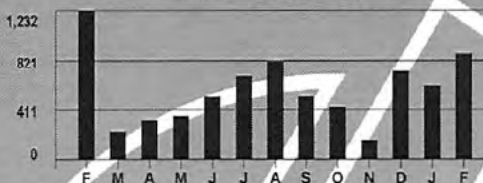
COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 31

KWH Usage Per Month

3300



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
02/14/19	02/28/19	01/12/19	02/12/19		42018	42904	1	886

Explanation of Charges

PREVIOUS AMOUNT DUE	95.00
THANK YOU FOR YOUR PAYMENT 02/07/19	-95.00
RESIDENTIAL CHARGES	121.77
CURRENT ELECTRIC CHARGES	121.77
OPERATION ROUND UP	0.23
TOTAL AMOUNT DUE	122.00

Download Coast Electric's FREE mobile app to have account information in the palm of your hand. Pay your bill, view our outage map and more!

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$2.65

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07260R



Please detach & return with payment

A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	122.00
DELINQUENT AFTER:	02/28/19

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



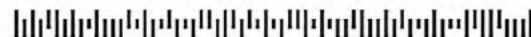
Outside Payment Kiosk



PALAZZO STEVEN
 PO BOX 6217
 GULFPORT MS 39506-6217

3022 13

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



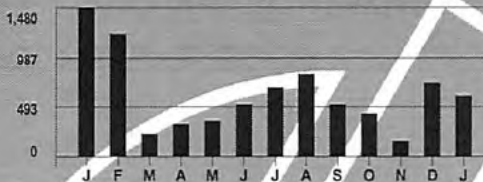
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20-2124_1698

CE_0075

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 31

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
01/14/19	01/28/19	12/12/18	01/12/19		41412	42018	1	606

Explanation of Charges

PREVIOUS AMOUNT DUE	107.00
THANK YOU FOR YOUR PAYMENT 12/28/18	-107.00
RESIDENTIAL CHARGES	94.36
CURRENT ELECTRIC CHARGES	94.36
SHARE YOUR BLESSINGS	0.64
TOTAL AMOUNT DUE	95.00

NOTICE: The board made amendments to CEPA's Bylaws including requiring mandatory Arbitration unless otherwise rejected. Go to Coastepa.com, call or visit an office to obtain a copy

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$1.81

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07280R



Please detach & return with payment

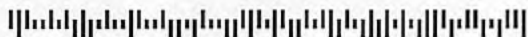
A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	95.00
DELINQUENT AFTER:	01/28/19

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



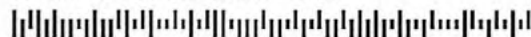
Outside Payment Kiosk



PALAZZO STEVEN
 PO BOX 6217
 GULFPORT MS 39506-6217

5929 25

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869002 6 0000000000 000009500 000010150 9

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 30

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
12/14/18	12/28/18	11/12/18	12/12/18		40681	41412	1	731


Explanation of Charges

PREVIOUS AMOUNT DUE	50.35
THANK YOU FOR YOUR PAYMENT 11/29/18	-50.35
RESIDENTIAL CHARGES	106.17
CURRENT ELECTRIC CHARGES	106.17
SHARE YOUR BLESSINGS	0.83
TOTAL AMOUNT DUE	107.00

NOTICE: The board made amendments to CEPA's Bylaws including requiring mandatory Arbitration unless otherwise rejected. Go to Coastepa.com, call or visit an office to obtain a copy

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$2.19


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280R

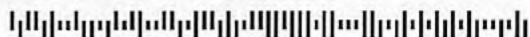


Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	107.00
DELINQUENT AFTER:	12/28/18

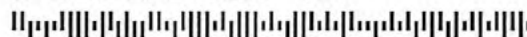
To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



PALAZZO STEVEN
 PO BOX 6217
 GULFPORT MS 39506-6217

3111 14

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



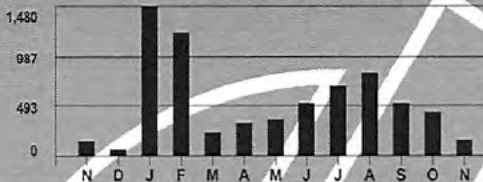
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20-2124_1700

CE_0077

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 31

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
11/15/18	11/29/18	10/12/18	11/12/18		40526	40681	1	155


Explanation of Charges

PREVIOUS AMOUNT DUE	72.40
THANK YOU FOR YOUR PAYMENT 11/01/18	-72.40
RESIDENTIAL CHARGES	50.35
CURRENT ELECTRIC CHARGES	50.35
TOTAL AMOUNT DUE	50.35

Download Coast Electric's FREE mobile app to have account information in the palm of your hand. Pay your bill, view our outage map and more.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$0.46


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280R



Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	50.35
DELINQUENT AFTER:	11/29/18

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



Outside Payment Kiosk



PALAZZO STEVEN
 PO BOX 6217
 GULFPORT MS 39506-6217

5787 23

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



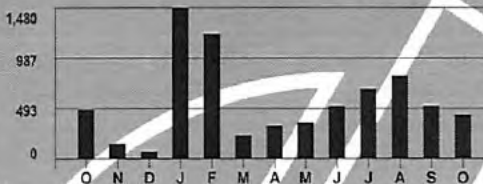
01076 00033869002 6 0000000000 000005035 000005685 5

20-2124_1701

CE_0078

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28
 Days of Service: 30

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
10/15/18	10/29/18	09/12/18	10/12/18		40094	40526	1	432


Explanation of Charges

PREVIOUS AMOUNT DUE	84.82
THANK YOU FOR YOUR PAYMENT 09/28/18	-84.82
RESIDENTIAL CHARGES	72.40
CURRENT ELECTRIC CHARGES	72.40
TOTAL AMOUNT DUE	72.40

Download Coast Electric's FREE mobile app to have account information in the palm of your hand. Pay your bill, view our outage map and more.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$1.29


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07280R



Please detach & return with payment

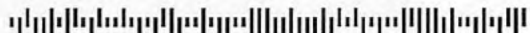
A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	72.40
DELINQUENT AFTER:	10/29/18

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



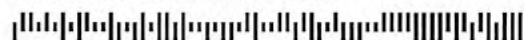
Outside Payment Kiosk



PALAZZO MURIEL
 PO BOX 7002
 GULFPORT MS 39506-7002

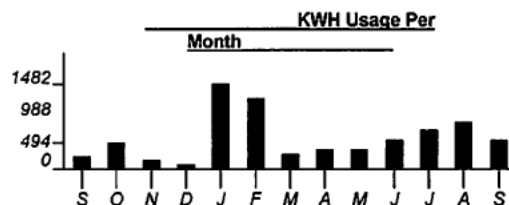
877 4

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 00033869002 6 0000000000 000007240 000007890 5

Customer Number: [REDACTED]
 Web ID: [REDACTED]
 Customer Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28



BILL DATE	DLIQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
09/14/18	09/28/18	08/13/18	09/12/18		39575	40094	1	519

Explanation of Charges

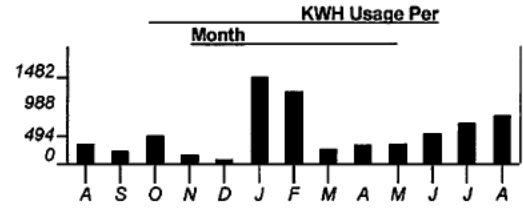
RESIDENTIAL CHARGES	80.14
SURGE HELP WARRANTY	4.62
CURRENT ELECTRIC CHARGES	84.76
PREVIOUS AMOUNT DUE	112.28
THANK YOU FOR YOUR PAYMENT 08/30/18	-112.22
PREVIOUS UNPAID BALANCE	0.06
<hr/>	
TOTAL AMOUNT DUE	84.82

IMPORTANT NOTICE

At Coast Electric, we value our members and want to make sure you have the most reliable service possible. Paying your bill before the delinquent date listed helps to ensure that your service will not be interrupted. If your service is disconnected due to nonpayment, you will be required to pay reconnect fee and a deposit equal to two months bill. If you have any questions or need to make payment arrangements, please contact us at 1-877-7MY-CEPA (877-769-2372) before the delinquent date. We take pride in serving our members and strive to make your experience with us pleasant and convenient.

Residential electric service is exempt from sales tax.

Customer Number: XXXXXXXXXX
 Web ID: XXXXXXXXXX
 Customer Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28



BILL DATE	DLIQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
08/14/18	08/28/18	07/13/18	08/13/18		38760	39575	1	815

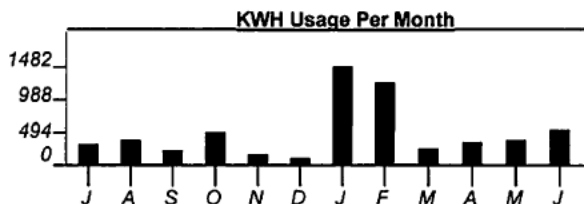
Explanation of Charges

RESIDENTIAL CHARGES	107.66
SURGE HELP WARRANTY	4.62
CURRENT ELECTRIC CHARGES	112.28
PREVIOUS AMOUNT DUE	271.06
THANK YOU FOR YOUR PAYMENT 07/31/18	-271.06
<hr/>	
TOTAL AMOUNT DUE	112.28

IMPORTANT NOTICE
 At Coast Electric, we value our members and want to make sure you have the most reliable service possible. Paying your bill before the delinquent date listed helps to ensure that your service will not be interrupted. If your service is disconnected due to nonpayment, you will be required to pay reconnect fee and a deposit equal to two months bill. If you have any questions or need to make payment arrangements, please contact us at 1-877-7MY-CEPA (877-769-2372) before the delinquent date. We take pride in serving our members and strive to make your experience with us pleasant and convenient.

Residential electric service is exempt from sales tax.

Customer Number: [REDACTED]
 Web ID: [REDACTED]
 Customer Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28



BILL DATE	DLIQUENT AFTER	Service		BILLED DEMAND	Meter Reading		M. Con
		From	To		Previous	Present	
07/16/18	Subject to disconnect	06/13/18	07/13/18		38070	38760	

Explanation of Charges

RESIDENTIAL CHARGES	95.38
PENALTY	6.50
SURGE HELP WARRANTY	4.62
CURRENT ELECTRIC CHARGES	106.50
PREVIOUS UNPAID BALANCE	164.56
TOTAL AMOUNT DUE	271.06

IMPORTANT NOTICE

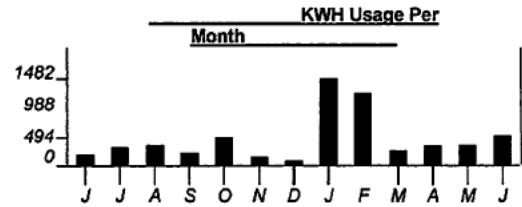
At Coast Electric, we value our members and want to ensure you have the most reliable service possible. Paying your bill before the delinquent date listed helps to ensure your service will not be interrupted. If your service is disconnected due to nonpayment, you will be required to pay your bill and a deposit equal to two months bill. If you have any questions or need to make payment arrangements, please contact us at 1-877-7MY-CEPA (877-769-2372) before the delinquent date. We take pride in serving our members and strive to make your experience with us as pleasant and convenient as possible.

*****Disconnect-
Notice******

To avoid disconnection of service this bill must be paid immediately. (Partial payment of the balance will not prevent interruption of this service.) You may call 1-800-624-3348 to pay by phone.

Residential electric service is exempt from sales tax.

Customer Number: [REDACTED]
 Web ID: [REDACTED]
 Customer Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28



BILL DATE	DLIQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
06/14/18	06/28/18	05/14/18	06/13/18		37548	38070	1	522

Explanation of Charges

RESIDENTIAL CHARGES

PENALTY

SURGE HELP WARRANTY

CURRENT ELECTRIC CHARGES

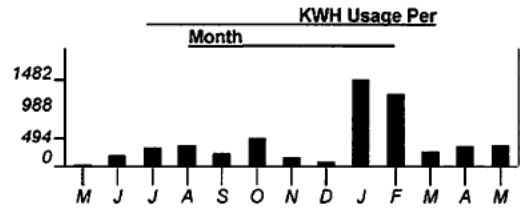
PREVIOUS UNPAID BALANCE

TOTAL AMOUNT DUE

80.41 **IMPORTANT NOTICE**
 6.50 At Coast Electric, we value our members and want to make sure you have the most reliable service possible. Paying your bill before the delinquent date listed helps to ensure that your service will not be interrupted. If your service is disconnected due to nonpayment, you will be required to pay reconnect fee and a deposit equal to two months bill. If you have any questions or need to make payment arrangements, please contact us at 1-877-7MY-CEPA (877-769-2372) before the delinquent date. We take pride in serving our members and strive to make your experience with us pleasant and convenient.

Residential electric service is exempt from sales tax.

Customer Number: [REDACTED]
 Web ID: [REDACTED]
 Customer Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28



BILL DATE	DLIQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
05/15/18	05/29/18	04/12/18	05/14/18		37186	37548	1	362

Explanation of Charges

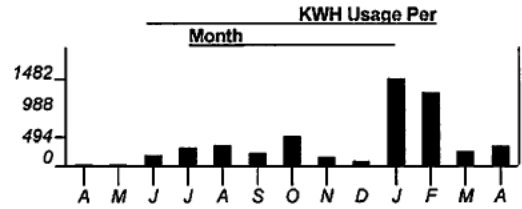
RESIDENTIAL CHARGES
 SURGE HELP WARRANTY
 CURRENT ELECTRIC CHARGES
 PREVIOUS AMOUNT DUE
 THANK YOU FOR YOUR PAYMENT 04/26/18

 TOTAL AMOUNT DUE

68.41 **IMPORTANT NOTICE**
 4.62 At Coast Electric, we value our members and want to make
 73.03 sure you have the most reliable service possible.
 67.40 Paying your
 -67.40 bill before the delinquent date listed helps to
 ensure that your
 service will not be interrupted. If your service is
 disconnected
 73.03 due to nonpayment, you will be required to pay
 reconnect fee
 and a deposit equal to two months bill. If you have
 any
 questions or need to make payment arrangements,
 please
 contact us at 1-877-7MY-CEPA (877-769-2372)
 before the
 delinquent date. We take pride in serving our
 members and
 strive to make your experience with us pleasant
 and
 convenient.

Residential electric service is exempt from sales tax.

Customer Number: XXXXXXXXXX
 Web ID: XXXXXXXXXX
 Customer Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28



BILL DATE	DLIQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
04/13/18	04/28/18	03/13/18	04/12/18		36862	37186	1	324

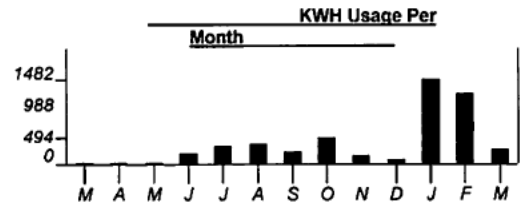
Explanation of Charges

RESIDENTIAL CHARGES	62.78
SURGE HELP WARRANTY	4.62
CURRENT ELECTRIC CHARGES	67.40
PREVIOUS AMOUNT DUE	59.18
THANK YOU FOR YOUR PAYMENT 03/30/18	-59.18
<hr/>	
TOTAL AMOUNT DUE	67.40

IMPORTANT NOTICE
 At Coast Electric, we value our members and want to make sure you have the most reliable service possible. Paying your bill before the delinquent date listed helps to ensure that your service will not be interrupted. If your service is disconnected due to nonpayment, you will be required to pay reconnect fee and a deposit equal to two months bill. If you have any questions or need to make payment arrangements, please contact us at 1-877-7MY-CEPA (877-769-2372) before the delinquent date. We take pride in serving our members and strive to make your experience with us pleasant and convenient.

Residential electric service is exempt from sales tax.

Customer Number: [REDACTED]
 Web ID: [REDACTED]
 Customer Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28



BILL DATE	DLIQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
03/14/18	03/28/18	02/13/18	03/13/18		36628	36862	1	234

Explanation of Charges

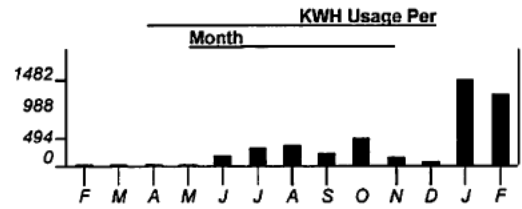
RESIDENTIAL CHARGES	54.56
SURGE HELP WARRANTY	4.62
CURRENT ELECTRIC CHARGES	59.18
PREVIOUS AMOUNT DUE	159.21
THANK YOU FOR YOUR PAYMENT 02/26/18	-159.21
<hr/>	
TOTAL AMOUNT DUE	59.18

IMPORTANT NOTICE

At Coast Electric, we value our members and want to make sure you have the most reliable service possible. Paying your bill before the delinquent date listed helps to ensure that your service will not be interrupted. If your service is disconnected due to nonpayment, you will be required to pay reconnect fee and a deposit equal to two months bill. If you have any questions or need to make payment arrangements, please contact us at 1-877-7MY-CEPA (877-769-2372) before the delinquent date. We take pride in serving our members and strive to make your experience with us pleasant and convenient.

Residential electric service is exempt from sales tax.

Customer Number: [REDACTED]
 Web ID: [REDACTED]
 Customer Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28



BILL DATE	DLIQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
02/14/18	02/28/18	01/14/18	02/13/18		35396	36628	1	1232

Explanation of Charges

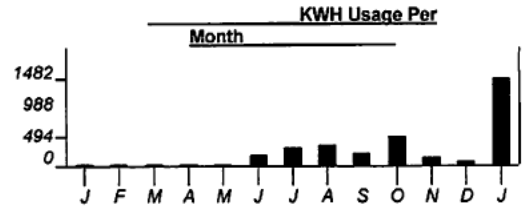
RESIDENTIAL CHARGES	154.59
SURGE HELP WARRANTY	4.62
CURRENT ELECTRIC CHARGES	159.21
PREVIOUS AMOUNT DUE	185.75
THANK YOU FOR YOUR PAYMENT 02/08/18	-185.75
<hr/>	
TOTAL AMOUNT DUE	159.21

IMPORTANT NOTICE

At Coast Electric, we value our members and want to make sure you have the most reliable service possible. Paying your bill before the delinquent date listed helps to ensure that your service will not be interrupted. If your service is disconnected due to nonpayment, you will be required to pay reconnect fee and a deposit equal to two months bill. If you have any questions or need to make payment arrangements, please contact us at 1-877-7MY-CEPA (877-769-2372) before the delinquent date. We take pride in serving our members and strive to make your experience with us pleasant and convenient.

Residential electric service is exempt from sales tax.

Customer Number: [REDACTED]
 Web ID: [REDACTED]
 Customer Name: PALAZZO MURIEL
 Service Address: OLD HWY 67 11072 APT
 Meter Serial Number: 5000047361
 Route: 28



BILL DATE	DLIQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
01/15/18	01/29/18	12/13/17	01/14/18		33916	35396	1	1480

Explanation of Charges

RESIDENTIAL CHARGES	181.13
SURGE HELP WARRANTY	4.62
CURRENT ELECTRIC CHARGES	185.75
PREVIOUS AMOUNT DUE	45.48
THANK YOU FOR YOUR PAYMENT 12/27/17	-45.48
<hr/>	
TOTAL AMOUNT DUE	185.75

IMPORTANT NOTICE

At Coast Electric, we value our members and want to make sure you have the most reliable service possible. Paying your bill before the delinquent date listed helps to ensure that your service will not be interrupted. If your service is disconnected due to nonpayment, you will be required to pay reconnect fee and a deposit equal to two months bill. If you have any questions or need to make payment arrangements, please contact us at 1-877-7MY-CEPA (877-769-2372) before the delinquent date. We take pride in serving our members and strive to make your experience with us pleasant and convenient.

Residential electric service is exempt from sales tax.

EXHIBIT 94

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN M
 Service Address: HAPPY LAKE RD HOUSE
 Meter Serial Number: 5000063783
 Route: 14
 Days of Service: 30

KWH Usage Per Month

5119



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
12/31/18	01/14/19	11/28/18	12/28/18		91837	92784	1	947

Explanation of Charges

PREVIOUS AMOUNT DUE	98.00
THANK YOU FOR YOUR PAYMENT 12/17/18	-196.00
PREVIOUS CREDIT BALANCE	-98.00
RESIDENTIAL CHARGES	127.52
CURRENT ELECTRIC CHARGES	127.52
SHARE YOUR BLESSINGS	0.48
TOTAL AMOUNT DUE TO BE PAID BY DRAFT	30.00

NOTICE: The board made amendments to CEPA's Bylaws including requiring mandatory Arbitration unless otherwise rejected. Go to Coastepa.com, call or visit an office to obtain a copy

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$2.84

For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative

MS07280R



Please detach & return with payment

A Touchstone Energy® Cooperative
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	30.00
DELINQUENT AFTER:	01/14/19

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



Outside Payment Kiosk

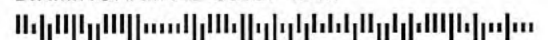
*****AUTO**5-DIGIT 39540



PALAZZO STEVEN M
 GREEN ACRES OF MS LLC
 970 TOMMY MUNRO DR STE D
 BILOXI MS 39532-2176

4671 18

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



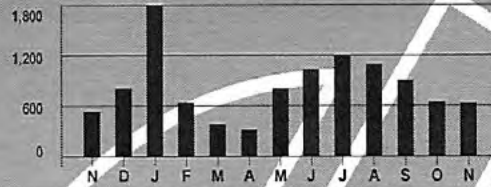
01076 03058504001 3 0000000000 000003000 000003000 1

20-2124_1713

CE_0018

Member Number: [REDACTED]
 Web Account Number: [REDACTED]
 Member Name: PALAZZO STEVEN M
 Service Address: HAPPY LAKE RD HOUSE
 Meter Serial Number: 5000063783
 Route: 14
 Days of Service: 31

KWH Usage Per Month



BILL DATE	DELINQUENT AFTER	Service		BILLED DEMAND	Meter Reading		Meter Constant	KWH Used
		From	To		Previous	Present		
11/30/18	12/14/18	10/28/18	11/28/18		91200	91837	1	637


Explanation of Charges

PREVIOUS AMOUNT DUE	92.77
THANK YOU FOR YOUR PAYMENT 11/14/18	-92.77
RESIDENTIAL CHARGES	98.00
CURRENT ELECTRIC CHARGES	98.00
TOTAL AMOUNT DUE TO BE PAID BY DRAFT	98.00

Download Coast Electric's FREE mobile app to have account information in the palm of your hand. Pay your bill, view our outage map and more.

Residential electric service is exempt from sales tax.
 Environmental Compliance Cost included in the above charges total: \$1.91


For a detailed bill, please refer to our web calculators at www.coastepa.com under Calculate My Bill.

A Touchstone Energy® Cooperative 

MS07260R



Please detach & return with payment

A Touchstone Energy® Cooperative 
 P.O. Box 2430 Address Service Requested
 Bay St. Louis, MS 39521-2430

Member Number:	[REDACTED]
Account Balance	98.00
DELINQUENT AFTER:	12/14/18

To change your address, phone number or to donate to Share Your Blessings, please visit www.coastepa.com, any Coast Electric office, or call us at 877-769-2372.



Outside Payment Kiosk

*****AUTO**5-DIGIT 39540



PALAZZO STEVEN M 2927 12
 GREEN ACRES OF MS LLC
 970 TOMMY MUNRO DR STE D
 BILOXI MS 39532-2176

COAST EPA
 DEPARTMENT 1340
 PO BOX 2153
 BIRMINGHAM AL 35287-1340



01076 0305&504001 3 0000000000 000009800 000009800 9

EXHIBIT 95

THEWIRE

WANT TO IMPROVE YOUR BOTTOM LINE?

TAKE A LOOK AT OUR BUSINESS BLOG

From Business Strategy to Social Media to Online Marketing and more, *TheWire* business blog provides the best business thinking, marketing insights and current trends – all designed to help you best your competition and improve your bottom line.

Big things every small business should know. Some sound business advice and experienced counsel can go a long way to making your small business the thriving success you always knew it could be. And that's what *TheWire* is all about.

Visit our business blog today at thewire.cableone.net



If you disagree with any portion of your bill, you must contact us no later than 60 days from the bill's "Date Due" date at 1-855-425-6161. For more information about billing questions, see www.cableone.net/pc/Pages/billingfaq.aspx

▼ PLEASE TEAR ALONG PERFORATION AND INCLUDE WITH PAYMENT ▼

CABLE ONE BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net
(877) 570-0500

BILLING SUMMARY (BILLING DETAIL ON REVERSE)

Account # [REDACTED]

PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
D'IBERVILLE MS 39540-0000

Previous Balance	336.16
Multiple Payments	336.16CR
Partial Month Charges	76.28
Monthly Services	266.38
Taxes & Fees	0.63
Total Due	\$343.29
DATE DUE	01/22/19

For services provided from 1/8/2019 to 2/7/2019
Payments not received by the 30th day of the billing cycle are subject to late fees.

Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.

PAYMENT COUPON

Save time & pay online: www.cableone.net/payment

Need assistance? Check online:
<http://support.cableone.net>

Account #	[REDACTED]
Balance Due	\$343.29
Date Due	01/22/19
Amount Paid	\$ _____

CABLE ONE BUSINESS

786 DR MARTIN LUTHER KING JR BLVD
BILOXI MS 39533-3836

6175 0000 NO RP 08 01082019 NNNNNNNY 01 081429 0257

PALAZZO FOR CONGRESS NEW
PO BOX 6217
GULFPORT MS 39506-6217

▼ MAIL PAYMENTS TO: ▼

CABLE ONE
PO BOX 9001009
LOUISVILLE, KY 40290-1009



20-2124_1716

385 121871545 00000343293 2

PFC_0084

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One					12/20/2018	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
1/16/2019	Bill	121871545	343.29	343.29		343.29
					Check Amount	343.29

Bancorp South

343.29

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One					12/20/2018	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
1/16/2019	Bill	121871545	343.29	343.29		343.29
					Check Amount	343.29

Bancorp South

343.29
20-2124_1717

PFC_0085

PAYMENT
RECORD





WANT TO IMPROVE YOUR BOTTOM LINE?

TAKE A LOOK AT OUR BUSINESS BLOG

From Business Strategy to Social Media to Online Marketing and more, *TheWire* business blog provides the best business thinking, marketing insights and current trends – all designed to help you best your competition and improve your bottom line.

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▼ PLEASE TEAR ALONG PERFORATION AND INCLUDE WITH PAYMENT ▼



786 DR MARTIN LUTHER KING JR BLVD
BILOXI MS 39533-3836

6175 0000 NO RP 08 02082019 NNYYNMY 01 079793 0213

PALAZZO FOR CONGRESS NEW
PO BOX 6217
GULFPORT MS 39506-6217



385 121871545 00000267013 6



BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net

(877) 570-0500

BILLING SUMMARY (BILLING DETAIL ON REVERSE)

Account # [REDACTED]
PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
D'IBERVILLE MS 39540-0000

Previous Balance	343.29
Payment Received 02/04/19	343.29CR
Monthly Services	266.38
Taxes & Fees	0.63

Total Due \$267.01

DATE DUE 02/22/19

For services provided from 2/8/2019 to 3/7/2019

Payments not received by the 30th day of the billing cycle are subject to late fees.

Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.



PAYMENT COUPON

Save time & pay online: www.cableone.net/payment

Need assistance? Check online:
<http://support.cableone.net>

Account # [REDACTED]	
Balance Due	\$267.01
Date Due	02/22/19
Amount Paid	\$ _____

▼ MAIL PAYMENTS TO: ▼

CABLE ONE
PO BOX 9001009
LOUISVILLE, KY 40290-1009



20-2124_1718

PFC_0086

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST



Cable One

Date	Type	Reference	Original Amt.	Balance Due	2/20/2019 Discount	Payment
2/8/2019	Bill	121871545	267.01	267.01		267.01
					Check Amount	267.01

Bancorp South

Account #

267.01

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST



Cable One

Date	Type	Reference	Original Amt.	Balance Due	2/20/2019 Discount	Payment
2/8/2019	Bill	121871545	267.01	267.01		267.01
					Check Amount	267.01

PAYMENT RECORD

Bancorp South

Account #

267.01



385 121871545 00000343293 2



CABLE ONE
PO BOX 9001009
LOUISVILLE, KY 40290-1009

▲ MAIL PAYMENTS TO: ▲



CABLE ONE BUSINESS
786 DR MARTIN LUTHER KING JR BLVD
BILOXI MS 39533-3836
6175 0000 NO RP 08 01082019 NNNNNNY 01 081429 0257
PALAZZO FOR CONGRESS NEW
PO BOX 6217
GULFPORT MS 39506-6217



▲ PLEASE TEAR ALONG PERFORATION AND INCLUDE WITH PAYMENT ▲

If you disagree with any portion of your bill, you must contact us no later than 60 days from the bill's "Date Due" date at 1-855-425-6161. For more information about billing questions, see www.cableone.net/pc/Pages/billingfaq.aspx



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THEWIRE

20-2124_1720

PFC_0088

PAYMENT COUPON
Save time & pay online: www.cableone.net/payment
Need assistance? Check online: <http://support.cableone.net>
Account # [REDACTED]
Balance Due \$343.29
Date Due 01/22/19
Amount Paid \$

Account # [REDACTED]
PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
DIBERVILLE MS 39540-0000
Previous Balance 336.16
Multiple Payments 336.16CR
Partial Month Charges 76.28
Monthly Services 266.38
Taxes & Fees 0.63
Total Due \$343.29
DATE DUE 01/22/19
For services provided from 1/8/2019 to 2/7/2019
Payments not received by the 30th day of the billing cycle are subject to late fees.
Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.

BILLING SUMMARY
(BILLING DETAIL ON REVERSE)
CABLE ONE BUSINESS
BUSINESS CARE Hours Days
Sales 7a-5p M-F
Customer Support 8a-5p M-F
Tech Support 24/7
business.cableone.net (877) 570-0500





104141

Bancorp South

343.29

PAYMENT RECEIPT

Cable One
Date 1/16/2019
Type Bill
Reference 121871545

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Bancorp South

343.29

Original Amt. 343.29
Balance Due 343.29
Discount
12/20/2018
Check Amount

Payment 343.29



Cable One
Date 1/16/2019
Type Bill
Reference 121871545

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Payment 343.29

Original Amt. 343.29
Balance Due 343.29
Discount
12/20/2018
Check Amount



385 121871545 00000267013 6



CABLE ONE
PO BOX 9001009
LOUISVILLE, KY 40290-1009

▲ MAIL PAYMENTS TO: ▲



786 DR MARTIN LUTHER KING JR BLVD
BILOXI MS 39533-3836
PALAZZO FOR CONGRESS NEW
PO BOX 6217
GULFPORT MS 39506-6217



8175 0000 NO RP 08 02082019 NNYYNNNY 01 079793 0213

Need assistance? Check online:
<http://support.cableone.net>
Account # [REDACTED]
Balance Due \$267.01
Date Due 02/22/19
Amount Paid \$

Save time & pay online: www.cableone.net/payment

PAYMENT COUPON

For services provided from 2/8/2019 to 3/7/2019
Payments not received by the 30th day of the billing
cycle are subject to late fees.
Questions about your bill? Billing disputes must be
provided to Cable One Business within sixty (60) days
of receipt of the billing statement. Failure to timely notify
Cable One Business Care at 877-570-0500 shall
constitute acceptance of this bill.

Previous Balance 343.29
Payment Received 02/04/19 343.29CR
Monthly Services 266.38
Taxes & Fees 0.63
Total Due \$267.01
DATE DUE 02/22/19

Account # [REDACTED]
PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
D'IBERVILLE MS 39540-0000

BILLING SUMMARY
(BILLING DETAIL ON REVERSE)

BUSINESS CARE Hours Days
Sales 7a-5p M-F
Customer Support 8a-5p M-F
Tech Support 24/7
business.cableone.net (877) 570-0500



▲ PLEASE TEAR ALONG PERFORATION AND INCLUDE WITH PAYMENT ▲



If you disagree with any portion of your bill, you must contact us no later than 60 days from the bill's "Date Due" date at 1-855-425-6161. For more information about billing questions, see www.cableone.net/vp/cpages/billingfaq.aspx

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WELCOME to Sparklight Business, formerly Cable ONE Business!

We appreciate your loyalty.

We are evolving with our customers and changing with the times.

Our new brand, Sparklight Business, better conveys who we are and what we stand for. We are enhancing the way we do business so that our customers feel like every interaction with us is effortless, our communities know we are here for the long term, and the towns and cities we serve are proud to call us a neighbor.

To stay up to date on all things Sparklight, check out our frequently asked questions at business.cableone.net/sparklight.

For customers on EasyPay, on a future statement, you'll notice that your bank or credit card payment draft will automatically transition from Cable ONE Business to Sparklight Business.

Sincerely,
Your Friends at




Click
business.sparklight.com/support
24/7 Support

Pay your bill with these convenient ways:

- Easy Pay
- Online Payment
- Pay by Phone or Check



5G4JF03J

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786 DR MARTIN LUTHER KING JR BLVD
BILOXI MS 39533-3836

6175 0000 NO RP 08 08082019 YYYYNNNY 01 074309 0296

PALAZZO FOR CONGRESS NEW
PO BOX 6217
GULFPORT MS 39506-6217



385 121871545 00000267013 6



BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net
(877) 570-0500

BILLING SUMMARY (BILLING DETAIL ON REVERSE)

Account # [REDACTED]
PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
D'IBERVILLE MS 39540-0000

Previous Balance	267.01
Payment Received 05/23/19	267.01 CR
Monthly Services	266.38
Taxes & Fees	0.63
Total Due	\$267.01
DATE DUE	06/22/19

For services provided from 6/8/2019 to 7/7/2019
Payments not received by the 30th day of the billing cycle are subject to late fees.

Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.

PAYMENT COUPON Save time & pay online: www.cableone.net/payment

Need assistance? Check online:
<http://support.cableone.net>

Account # [REDACTED]	
Balance Due	\$267.01
Date Due	06/22/19
Amount Paid	\$ _____

▼ MAIL PAYMENTS TO: ▼

CABLE ONE
PO BOX 9001009
LOUISVILLE, KY 40290-1009



20-2124_1723

PFC_0091

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST



Cable One					6/24/2019	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
6/8/2019	Bill	121871545	267.01	267.01		267.01
					Check Amount	267.01

Bancorp South Account #  267.01

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST



Cable One					6/24/2019	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
6/8/2019	Bill	121871545	267.01	267.01		267.01
					Check Amount	267.01

PAYMENT
RECORD

Bancorp South Account #  267.01



104141



Rev 2/1

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One					7/18/2019	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
7/18/2019	Bill		267.01	267.01		267.01
					Check Amount	267.01

Bancorp South

267.01

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One					7/18/2019	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
7/18/2019	Bill		267.01	267.01		267.01
					Check Amount	267.01

Bancorp South

267.01

PAYMENT RECORD



104141

10414

Rev 2/

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date	Type	Reference	Original Amt.	Balance Due	12/20/2018 Discount	Payment
12/20/2018	Bill	Act# [REDACTED]	112.61	112.61	Check Amount	112.61

Bancorp South

112.61

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date	Type	Reference	Original Amt.	Balance Due	12/20/2018 Discount	Payment
12/20/2018	Bill	Act# [REDACTED]	112.61	112.61	Check Amount	112.61

PAYMENT
RECORD

Bancorp South

112.61





6175 0000 NO RP 08 12082018 NNNNNNNY 01 082138 0225

Detail of Charges

Previous Balance/Payment Received by 12/08/18		
11/08	Previous Balance	223.55
11/11	Payment - Thank You	55.47CR
	Total Remaining Balance	\$168.08

Adjustments & Other Activity		
12/07	Business Late Fee Adjustment	8.00
	Total Adjustments & Other Activity	\$8.00

Monthly Services		
12/08 - 01/07	Office 100	130.00
	Business Internet Plan	
	- Up to 100Mbps download	
	- Up to 10Mbps upload	
12/08 - 01/07	Additional Static IP	9.95
12/08 - 01/07	Business Wi-Fi	9.95
12/08 - 01/07	Modem Lease	8.99
	Total Monthly Services	\$158.89

Taxes & Fees		
12/07	Sales Tax	0.56
12/08 - 01/07	Sales Tax	0.63
	Total Taxes & Fees	\$1.19

Total Due by ON RECEIPT	\$336.16
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FRANCHISE AUTHORITY
City of D'Iberville
City Manager
P.O Box 6024
D'Iberville, MS 39532

PAYMENT OPTIONS:

Cable ONE Business does **not** accept payments at the local office.
Online: Pay using your Visa, MasterCard, Discover or debit card at business.cableone.net
EasyPay: Have your payment made automatically every month. cableone.net/paycenter
Pay by phone: Pay using our automated phone system 24 hours a day for free at 877-692-2253 or call our office during business hours and an agent can take your payment over the phone. (Charges may apply)



By sending your check, you acknowledge the authorization of Cable ONE Business to use information on your check to make a one-time electronic transfer from your account or to process the payment as a check transaction. When Cable ONE Business uses information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day your payment is received, and you will not receive your check back from your financial institution. If we cannot collect your electronic payment, or if your check is returned unpaid, we will issue a draft against your account. If you do not have sufficient funds in your account, a service charge of \$40 or the maximum allowed by law will be debited from your account. Please contact the local Cable ONE Business office about other payment options if you prefer not to have your check used in this way.

As part of Cable ONE Business' agreement to provide you services, you agree to pay the late fees that Cable ONE Business charges for the costs associated with delinquent payment. Cable ONE Business will assess an initial fee of \$8.00 if your payment on each invoice has not been received by day 30 of the billing cycle (i.e. the date we begin to generate your next invoice) and, if payment on that invoice is still not received 10 days later, an additional fee of \$2.00 will be assessed.

THEWIRE

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CABLE ONE BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net
(877) 570-0500

BILLING SUMMARY (BILLING DETAIL ON REVERSE)

Account # [REDACTED]
PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
D'IBERVILLE MS 39540-0000

Previous Balance	55.47
Adjustments & Other Activity	8.00
Monthly Services	158.89
Taxes & Fees	1.19
Total Due	\$223.55

DATE DUE ON RECEIPT

For services provided from 11/8/2018 to 12/7/2018

At this time, your payment for last month's service has not been received and a late fee has been applied to your account. Your delinquent balance must be paid immediately or your service may be disconnected without further notice. Payment can be made for free online at mybill.cableone.net or through our automated system by calling 877-570-0500. Service interruption may require payment through an agent (charges may apply.) If your service is disconnected due to non-payment, any past due amount, a reconnection fee, deposits on services and equipment and one month's service charges in advance may be required prior to reactivation.

Payments not received by the 30th day of the billing cycle are subject to late fees.

20-2124_1728

PFC_0157

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P.W. 0105



If you disagree with any portion of your bill, you must contact us no later than 60 days from the bill's "Date Due" date at 1-855-425-8161. For more information about billing questions, see www.cableone.net/cc/Pages/billingfaq.aspx

CABLE ONE[®] BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net
(877) 570-0500

BILLING SUMMARY (BILLING DETAIL ON REVERSE)

Account #	[REDACTED]
PALAZZO FOR CONGRESS NEW 11072 OLD HIGHWAY 67 D'IBERVILLE MS 39540-0000	
Previous Balance	104.05CR
Monthly Services	158.89
Taxes & Fees	0.63
Total Due	\$55.47
DATE DUE	10/22/18

For services provided from 10/8/2018 to 11/7/2018
Payments not received by the 30th day of the billing cycle are subject to late fees.

Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.



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CABLE ONE BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net

(877) 570-0500

BILLING SUMMARY

BILLING DETAILS ON REVERSE

Account # [REDACTED]
PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
D IBERVILLE MS 39540-0000

Previous Balance	0.00
Partial Month Charges	4.80
Monthly Services	148.94
Taxes & Fees	0.65

Total Due \$154.39

DATE DUE 03/22/18

For services provided from 3/7/2018 to 4/7/2018

Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.

Prorates / Partial Month explanation.

Fees for monthly service are paid in advance. However, your first bill will include fees for the remainder of this month plus fees for the upcoming first full service month.



If you disagree with any portion of your bill, you must contact us no later than 60 days from the bill's "Date Due" date at 1-855-425-6161. For more information about billing questions, see www.cableone.net/pc/Pages/billingfaq.aspx

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
10/22/2018	Bill		55.47	55.47	10/22/2018	55.47
					Check Amount	55.47

PAYMENT
RECORD

Bancorp South

Account# [REDACTED]

55.47



104151

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date	Type	Reference	Original Amt.	Balance Due	3/26/2018 Discount	Payment
3/15/2018	Bill		154.39	154.39		154.39
					Check Amount	154.39

Bancorp South

154.39

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date	Type	Reference	Original Amt.	Balance Due	3/26/2018 Discount	Payment
3/15/2018	Bill		154.39	154.39		154.39
					Check Amount	154.39

PAYMENT
RECORD

Bancorp South

154.39



PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Date	Type	Reference	Original Amt.	Balance Due	8/24/2018 Discount	Payment
8/24/2018	Bill	Cable One	263.57	263.57		263.57
					Check Amount	263.57

Bancorp South

263.57

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Date	Type	Reference	Original Amt.	Balance Due	8/24/2018 Discount	Payment
8/24/2018	Bill	Cable One	263.57	263.57		263.57
					Check Amount	263.57

Bancorp South

263.57

PAYMENT
RECORD



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▼ PLEASE TEAR ALONG PERFORATION AND INCLUDE WITH PAYMENT ▼

CABLE ONE[®]
BUSINESS

786 DR MARTIN LUTHER KING JR BLVD
BILOXI MS 39533-3836

6175 0000 NO RP 08 08082018 NNNNNNNY 01 080055 0174

CONGRESSMAN STEVE PALAZZO
ATTN: CONGRESSMAN
PO BOX 6217
GULFPORT MS 39506-6217



385 107263055 00000263574 1

CABLE ONE[®]
BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net
(877) 570-0500

BILLING SUMMARY
(BILLING DETAIL ON REVERSE)

Account # [REDACTED]
CONGRESSMAN STEVE
PALAZZO
970 TOMMY MUNRO DR STE D
BILOXI MS 39532-2176

Previous Balance	263.57
Payment Received 07/23/18	263.57CR
Monthly Services	231.00
Other Charges	15.60
Taxes & Fees	16.97

Total Due **\$263.57**
DATE DUE **08/22/18**

For services provided from 8/8/2018 to 9/7/2018

Payments not received by the 30th day of the billing cycle are subject to late fees.

Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.

PAYMENT COUPON

Save time & pay online: www.cableone.net/payment

Need assistance? Check online:
<http://support.cableone.net>

Account # [REDACTED]
Balance Due **\$263.57**
Date Due **08/22/18**
Amount Paid \$ _____

▼ MAIL PAYMENTS TO: ▼

CABLE ONE
PO BOX 9001009
LOUISVILLE, KY 40290-1009



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CABLE ONE BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net

(877) 570-0500

BILLING SUMMARY

(BILLING DETAIL ON REVERSE)

Account # [REDACTED]
 CONGRESSMAN STEVE
 PALAZZO
 970 TOMMY MUNRO DR STE D
 BILOXI MS 39532-2176

Previous Balance	263.57
Payment Received 08/22/18	263.57CR
Monthly Services	231.99
Other Charges	15.60
Taxes & Fees	17.04

Total Due \$264.63

DATE DUE 09/22/18

For services provided from 9/8/2018 to 10/7/2018

Payments not received by the 30th day of the billing cycle are subject to late fees.

Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.

If you disagree with...
PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Date	Type	Reference
11/29/2018	Bill	

Original Amt.
223.55

Balance Due
223.55

11/29/2018
Discount
Check Amount

Payment
223.55
223.55

223.55

Bancorp South

Account # [REDACTED]

LOUISVILLE, KY 40290-1009



385 107263055 00000264630 0

THEWIRE

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▼ PLEASE TEAR ALONG PERFORATION AND INCLUDE WITH PAYMENT ▼

CABLE ONE
BUSINESS

786 DR MARTIN LUTHER KING JR BLVD
BILOXI MS 39533-3836

6175 0000 NO RP 08 10082018 NNNNNNNY 01 079302 0288

CONGRESSMAN STEVE PALAZZO
ATTN: CONGRESSMAN
PO BOX 6217
GULFPORT MS 39506-6217



385 107263055 00000264614 4

CABLE ONE
BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net
(877) 570-0500

BILLING SUMMARY

(BILLING DETAIL ON REVERSE)

Account # [REDACTED]
CONGRESSMAN STEVE
PALAZZO
970 TOMMY MUNRO DR STE D
BILOXI MS 39532-2176

Previous Balance	264.63
Payment Received 09/17/18	264.63CR
Monthly Services	231.99
Other Charges	15.60
Taxes & Fees	17.02

Total Due **\$264.61**

DATE DUE **10/22/18**

For services provided from 10/8/2018 to 11/7/2018

Payments not received by the 30th day of the billing cycle are subject to late fees.

Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.

PAYMENT COUPON

Save time & pay online: www.cableone.net/payment

Need assistance? Check online:
<http://support.cableone.net>

Account # [REDACTED]
Balance Due **\$264.61**
Date Due **10/22/18**
Amount Paid \$ _____

▼ MAIL PAYMENTS TO: ▼

CABLE ONE
PO BOX 9001009
LOUISVILLE, KY 40290-1009



THEWIRE

WANT TO IMPROVE YOUR BOTTOM LINE?

TAKE A LOOK AT OUR BUSINESS BLOG

From Business Strategy to Social Media to Online Marketing and more, *TheWire* business blog provides the best business thinking, marketing insights and current trends – all designed to help you best your competition and improve your bottom line.

Big things every small business should know. Some sound business advice and experienced counsel can go a long way to making your small business the thriving success you always knew it could be. And that's what *TheWire* is all about.

Visit our business blog today at thewire.cableone.net

AUG 13 2018



If you disagree with any portion of your bill, you must contact us no later than 60 days from the bill's "Date Due" date at 1-855-425-6161. For more information about billing questions, see www.cableone.net/nc/Pages/billingfaq.aspx

▼ PLEASE TEAR ALONG PERFORATION AND INCLUDE WITH PAYMENT ▼

CABLE ONE
BUSINESS

786 DR MARTIN LUTHER KING JR BLVD
BILOXI MS 39533-3836

6175 0000 NO RP 08 08082018 NNNNNNNY 01 028874 0060

PALAZZO FOR CONGRESS NEW
970 TOMMY MUNRO DR STE D
BILOXI MS 39532-2176



▼ MAIL PAYMENTS TO: ▼

CABLE ONE
PO BOX 9001009
LOUISVILLE, KY 40290-1009



385 121871545 00000160606 5

CABLE ONE
BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net
(877) 570-0500

BILLING SUMMARY
(BILLING DETAIL ON REVERSE)

Account # [REDACTED]
PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
D'IBERVILLE MS 39540-0000

Previous Balance	327.62
Payment Received 07/31/18	327.62CR
Adjustments & Other Activity	2.00
Monthly Services	157.90
Taxes & Fees	0.70

Total Due \$160.60
DATE DUE 08/22/18

For services provided from 8/8/2018 to 9/7/2018
Payments not received by the 30th day of the billing cycle are subject to late fees.

Questions about your bill? Billing disputes must be provided to Cable ONE Business within sixty (60) days of receipt of the billing statement. Failure to timely notify Cable ONE Business Care at 877-570-0500 shall constitute acceptance of this bill.

Handwritten signature and date: 8/13/18

PAYMENT COUPON

Save time & pay online: www.cableone.net/payment

Need assistance? Check online:
<http://support.cableone.net>

Account # [REDACTED]
Balance Due \$160.60
Date Due 08/22/18
Amount Paid \$ _____

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date	Type	Reference	Original Amt.	Balance Due	8/14/2018 Discount	Payment
8/13/2018	Bill		160.60	160.60		160.60
					Check Amount	160.60

Bancorp South

160.60

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date	Type	Reference	Original Amt.	Balance Due	8/14/2018 Discount	Payment
8/13/2018	Bill		160.60	160.60		160.60
					Check Amount	160.60

Bancorp South

160.60



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JUL 16 2018

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Visit our business blog today at thewire.cableone.net



If you disagree with any portion of your bill, you must contact us no later than 60 days from the bill's "Date Due" date at 1-855-425-6161. For more information about billing questions, see www.cableone.net/pc/Pages/billingfaq.aspx

▼ PLEASE TEAR ALONG PERFORATION AND INCLUDE WITH PAYMENT ▼

CABLE ONE BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net
(877) 570-0500

BILLING SUMMARY (BILLING DETAIL ON REVERSE)

Account # [REDACTED]
PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
D'IBERVILLE MS 39540-0000

Previous Balance	180.60
Adjustments & Other Activity	8.00
Monthly Services	157.90
Taxes & Fees	1.12

Total Due \$327.62

DATE DUE ON RECEIPT

For services provided from 7/8/2018 to 8/7/2018

At this time, your payment for last month's service has not been received and a late fee has been applied to your account. Your delinquent balance must be paid immediately or your service may be disconnected without further notice. Payment can be made for free online at mybill.cableone.net or through our automated system by calling 877-570-0500. Service interruption may require payment through an agent (charges may apply.) If your service is disconnected due to non-payment, any past due amount, a reconnection fee, deposits on services and equipment and one months service charges in advance may be required prior to reactivation.

Payments not received by the 30th day of the billing cycle are subject to late fees.

20-2124 1738

PFC_0167

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST



Cable One					7/27/2018	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
7/27/2018	Bill		327.62	327.62		327.62
					Check Amount	327.62

Bancorp South

327.62

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST



Cable One					7/27/2018	
Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
7/27/2018	Bill		327.62	327.62		327.62
					Check Amount	327.62

PAYMENT
RECORD

Bancorp South

327.62



PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date	Type	Reference	Original Amt.	Balance Due	10/4/2018 Discount	Payment
9/22/2018	Bill		264.63	264.63		264.63
					Check Amount	264.63

Bancorp South Account [REDACTED] 264.63

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date	Type	Reference	Original Amt.	Balance Due	10/4/2018 Discount	Payment
9/22/2018	Bill		264.63	264.63		264.63
					Check Amount	264.63

Bancorp South Account [REDACTED] 264.63

PAYMENT
RECORD



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Visit our business blog today at thewire.cableone.net



If you disagree with any portion of your bill, you must contact us no later than 60 days from the bill's "Date Due" date at 1-855-425-8161. For more information about billing questions, see www.cableone.net/pc/Pages/billingfaq.aspx

▼ PLEASE TEAR ALONG PERFORATION AND INCLUDE WITH PAYMENT ▼

CABLE ONE
BUSINESS

786 DR MARTIN LUTHER KING JR BLVD
BILOXI MS 39533-3836

8175 0000 NO RP 08 05082018 NNNNNNNY 01 027939 0073

PALAZZO FOR CONGRESS NEW
970 TOMMY MUNRO DR STE D
BILOXI MS 39532-2176

PO Box



385 121871545 00000337956 2

CABLE ONE
BUSINESS

BUSINESS CARE	Hours	Days
Sales	7a-5p	M-F
Customer Support	8a-5p	M-F
Tech Support	24/7	

business.cableone.net

(877) 570-0500

BILLING SUMMARY

(BILLING DETAIL ON REVERSE)

Account # [REDACTED]
PALAZZO FOR CONGRESS NEW
11072 OLD HIGHWAY 67
D IBERVILLE MS 39540-0000

Previous Balance	323.18
Payment Received 04/18/18	154.39CR
Adjustments & Other Activity	10.00
Monthly Services	157.90
Taxes & Fees	1.26

Total Due \$337.95

DATE DUE ON RECEIPT

For services provided from 5/8/2018 to 6/7/2018

At this time, your payment for last month's service has not been received and a late fee has been applied to your account. Your delinquent balance must be paid immediately or your service may be disconnected without further notice. Payment can be made for free online at mybill.cableone.net or through our automated system by calling 877-570-0500. Service interruption may require payment through an agent (charges may apply.) If your service is disconnected due to non-payment, any past due amount, a reconnection fee, deposits on services and equipment and one months service charges in advance may be required prior to reactivation.

PAYMENT COUPON

save time & pay online: www.cableone.net/payment

Need assistance? Check online:
<http://support.cableone.net>

Account # [REDACTED]
Balance Due \$337.95
Date Due ON RECEIPT
Amount Paid \$ _____

▼ MAIL PAYMENTS TO: ▼

CABLE ONE
PO BOX 9001009
LOUISVILLE, KY 40290-1009



5175 0000 NO RP 05 05062018 NNNNNNNY 01 027939 0073

Detail of Charges

Previous Balance/Payment Received by 05/08/18		
04/08	Previous Balance	323.18
04/19	Payment - Thank You	154.39CR
	Total Remaining Balance	\$168.79
Adjustments & Other Activity		
04/16	Business Late Fee Adjustment	2.00
05/07	Business Late Fee Adjustment	8.00
	Total Adjustments & Other Activity	\$10.00
Monthly Services		
05/08 - 06/07	Office 100	130.00
	Business Internet Plan	
	- Up to 100Mbps download	
	- Up to 10Mbps upload	
05/08 - 06/07	Additional Static IP	9.95
05/08 - 06/07	Business Wi-Fi	9.95
05/08 - 06/07	Modem Lease	8.00
	Total Monthly Services	\$157.90
Taxes & Fees		
04/16	Sales Tax	0.14
05/07	Sales Tax	0.58
05/08 - 06/07	Sales Tax	0.56
	Total Taxes & Fees	\$1.26
Total Due by ON RECEIPT		\$337.95

FRANCHISE AUTHORITY
City of D'Iberville
City Manager
P.O. Box 6024
D'Iberville, MS 39532

PAYMENT OPTIONS:

Cable ONE Business does **not** accept payments at the local office.
Online: Pay using your Visa, MasterCard, Discover or debit card at business.cableone.net

EasyPay: Have your payment made automatically every month.
cableone.net/paycenter

Pay by phone: Pay using our automated phone system 24 hours a day for free at 877-692-2253 or call our office during business hours and an agent can take your payment over the phone. (Charges may apply)



By sending your check, you acknowledge the authorization of Cable ONE Business to use information on your check to make a one-time electronic transfer from your account or to process the payment as a check transaction. When Cable ONE Business uses information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day your payment is received, and you will not receive your check back from your financial institution. If we cannot collect your electronic payment, or if your check is returned unpaid, we will issue a draft against your account. If you do not have sufficient funds in your account, a service charge of \$40 or the maximum allowed by law will be debited from your account. Please contact the local Cable ONE Business office about other payment options if you prefer not to have your check used in this way.

As part of Cable ONE Business' agreement to provide you services, you agree to pay the late fees that Cable ONE Business charges for the costs associated with delinquent payment. Cable ONE Business will assess an initial fee of \$8.00 if your payment on each invoice has not been received by day 30 of the billing cycle (i.e. the date we begin to generate your next invoice) and, if payment on that invoice is still not received 10 days later, an additional fee of \$2.00 will be assessed.

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date Type Reference
5/29/2018 Bill

Original Amt.
337.95

Balance Due
337.95

6/1/2018
Discount
Check Amount

Payment
337.95
337.95

Bancorp South

337.95

PALAZZO FOR CONGRESS / PUTTING MISSISSIPPI FIRST

Cable One

Date Type Reference
5/29/2018 Bill

Original Amt.
337.95

Balance Due
337.95

6/1/2018
Discount
Check Amount

Payment
337.95
337.95

PAYMENT
RECORD

Bancorp South

337.95



EXHIBIT 96



Business Services Agreement

Date: 02/28/2018

Cable One Business Account Rep:	Kenisha Walker	Cable One System Address:
Phone Number:	[REDACTED]	210 E Earll Drive
Fax Number:	(888) 559-2040	Phoenix, AZ 85012

Customer Information:		Authorized Customer Representative	
Company Name:	Palazzo for Congress new	Full Name:	Bridgette Jones
Street Address:	11072 Old Highway 67	Billing Telephone:	
City/State/ZIP:	Diberville, MS 39540	Fax:	
Billing Address:		Contact Number:	[REDACTED]
City/State/ZIP:		Email Address:	bridgette.jones [REDACTED]
Cable One Account #:			

Taxes and Fees Not Included

Service Description	Quantity
D3 Office (100Mbps x 10Mbps)	1
1 Static IP	1
Installation	1
Installation Charge (may include construction):	\$0.00
Term:	Monthly
Total:	\$148.94

Equipment Charges

Description	Quantity	Unit Price	Total Fee
D3 Modem Rental	1	\$8.99	\$8.99
Devices			Monthly Fee
Subtotal:			

Special Conditions

Agreement

THE SERVICE CHARGES AND FEES TOTAL \$148.94 PER MONTH FOR THE DURATION OF THE INITIAL TERM AND MAY BE REVISED AFTERWARD. THOUGH VIDEO SERVICE FEES MAY BE INCREASED, HSD AND PHONE SERVICE FEES WILL NOT BE INCREASED DURING THE TERM. SEPARATELY, THE EQUIPMENT FEES MAY BE REVISED. THE SERVICE TERM SHALL BE DEEMED TO BEGIN UPON INSTALLATION AND TERMINATE AT THE COMPLETION OF THE TERM NOTED ABOVE.

By signing below, I acknowledge that I have read, understand, and agree to be bound by and comply with the above service information and charges, and the attached terms and conditions and service-specific agreements. I warrant that I am the Customer or have the authority to represent and bind the Customer. If I provide an email address, a copy of this document and the relevant service-specific agreements will be emailed to me for my records. I understand that I have the right to receive paper copies of this and any other agreements applicable to the Service(s) I have ordered by calling my local Cable One office, and I consent to the use of electronic documents and signature. I acknowledge that I may cancel this agreement without an early termination penalty within thirty (30) days.

Customer Authorized Signature	<u>Bridgette Jones</u> <small>Bridgette Jones (Feb 28, 2018)</small>
Print	Bridgette Jones
Date	Feb 28, 2018

EXHIBIT 97

ECR INC

PO BOX 2309
 GULFPORT MS 39505-2309
 228-832-9597

Fax: 228-314-3174
 er9597

Estimate

Date	Estimate #
2/21/2018	329

Name / Address
PALAZZO CAMPAIGN OFFICE 11072 OLD HIGHWAY 67 DIBERVILLE MS 39540-8000

Project

Item	Description	Qty	Total
SURVEILLANCE SERVICE	INSTALLATION & LEASE ONLY OF SURVEILLANCE SYSTEM 1 - 8CH DVR 4 - HD COLOR 1080P EXTERIOR CAMERAS 1 - 4CH POWER SUPPLY LABOR & WIRE LEASE FEE W/ EMAIL INVOICES & MONTHLY EASY PAY 6 MTHS @ \$250		1,500.00T

This is an estimate only. Does not include unforeseen price increases and/or additional labor and materials that may be required.
 Estimate is valid for 15 days.

Sales Tax (7.0%) \$105.00

Total \$1,605.00

EDDIE ROBERSON: _____

Customer Signature _____

EXHIBIT 98

Please consider the below as my statement of June 22, 2020, based on my individual recollection of the timeframe for which the letter dated June 11, 2020 from the Office of Congressional Ethics regarding its Request for Information:

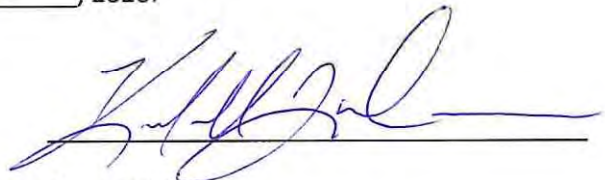
I, Kendall J. Dunn, as of this date have no recollection of any service(s) which I would have provided to Palazzo for Congress (Rep. Steven Palazzo's congressional campaign committee), Rep. Steven Palazzo, Lisa Palazzo (Belvin), Paul Breazeale or anyone acting on their behalf, in or about January 2019. Therefore, I have no descriptive information to provide related to the nature of services, location of services, the process of hiring for such services, the dates the services were performed, and the amount of payments for such services.

Although I have no recollection of the aforementioned services for which the Request for Information seeks to investigate, I conducted a review of my personal records in an attempt to fully comply with the Request for Information and found no documents or communications related to services identified in Request No. 1.

Notwithstanding the above, I have known Rep. Steven Palazzo and members of his family since college and have had the opportunity to speak with him over the years on several occasions and consider him a personal friend.

Enclosed with this Statement is an executed Request for Information Certification provided at the request of the Office of Congressional Ethics.

Signed this the 22 day of JUNE, 2020.

A handwritten signature in blue ink, appearing to read 'Kendall J. Dunn', is written over a horizontal line.

Kendall J. Dunn

EXHIBIT 99

From: [Steven Palazzo](#)
Subject: PFC AMEX Cards
Date: Sunday, June 28, 2020 3:58:17 PM

Team P,

In an effort to strengthen our internal controls we will be freezing all AMEX cards within 30 days. Please identify any official campaign monthly re-occurring charges that are on the card as we will need to direct them to the primary card holder.

Also this is a good time to assess if we still need those services and please let us know what those services are for.

Authorized and official campaign expense reimbursements will be completed by filling out an expense reimbursement form and attaching receipts that provide details of the purchase so our treasurer can accurately identify the transaction for reporting purposes.

Any questions please contact myself or Hunter or myself.

Regards,

Steven

EXHIBIT 100

From: [Cameron Bell](#)
To: [Brown, Jeffrey](#)
Subject: FW: River House
Date: Monday, July 6, 2020 1:47:36 PM
Attachments: [image001.jpg](#)
[ATT00001.htm](#)
[3865_001.pdf](#)
[ATT00002.htm](#)

Cameron C. Bell

Realtor | Broker | Attorney*

Cameron Bell Properties, Inc.

14335 Dedeaux Road

Gulfport, MS 39503

Cell [REDACTED]

Fax (800) 520-3445

www.cameronbellproperties.com

*Not actively practicing law.

From: Z112 Palazzo, Steven <[REDACTED]>
Sent: Thursday, February 22, 2018 2:58 PM
To: cameronbel [REDACTED]
Subject: Fwd: River House

Sent from my iPad

Begin forwarded message:

From: "Philpot, Maurine" <[REDACTED]>
Date: February 22, 2018 at 2:56:19 PM CST
To: "Z112 Palazzo, Steven" <[REDACTED]>
Subject: River House

Per your request

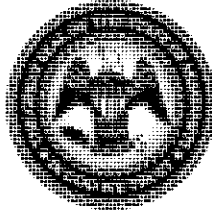
C. Maurine Bruner-Philpot
Constituent Liaison
Hattiesburg Office

641 Main St., Suite 142
Hattiesburg, MS 39401
Phone: (601) 582-3246
Fax: (601) 582-3452

<http://palazzo.house.gov/forms/emailsignup/>



Virus-free. www.avg.com



INFORMATIONAL STATEMENT FOR MISSISSIPPI PROPERTY CONDITION

DISCLOSURE STATEMENT (PCDS)

In accordance with Sections 89-1-501 through 89-1-527 of the Mississippi Code of 1954, as amended, A TRANSFEROR/SELLER of real property consisting of not less than one (1) nor more than four (4) dwelling units shall provide a Property Condition Disclosure Statement when the transfer is by, or with the aid of, a duly licensed real estate broker or salesperson. The required Property Condition Disclosure Statement shall be in the form promulgated by the Mississippi Real Estate Commission (MREC) or on another form that contains the identical information. The Property Condition Disclosure Statement may not be personalized in any fashion. All "Forms" which have been promulgated and approved by the Real Estate Commission for use by licensees in real estate transactions may be found at www.mrec.ms.gov.

PURCHASER RIGHTS & CONSEQUENCES OF FAILURE TO DISCLOSE:

If the PCDS is delivered after the Transferee/Buyer has made an offer, the transferee may terminate any resulting real estate contract or withdraw any offer for a time period of three (3) days after the delivery in person or five (5) days after the delivery by deposit in mail. This termination or withdrawal will always be without penalty to the Transferee and any deposit or earnest money must be promptly returned to the prospective purchaser (despite any agreement to the contrary).

LICENSEE DUTIES & CONSEQUENCES OF FAILURE TO FULFILL DUTIES:

The Mississippi Statute requires real estate licensees to inform their clients of those clients' duties and rights in association with the completion of the Property Condition Disclosure Statement. The failure of any licensee to inform their client of the clients' responsibilities could subject the licensee (salesperson and broker) to censure, suspension, or revocation of their respective real estate licenses. The licensee is not liable for any error, inaccuracy or omission in a Property Condition Disclosure Statement UNLESS the licensee has actual knowledge of the error, inaccuracy or omission by the Transferor/Seller.

IMPORTANT PROVISIONS OF THE LAW:

- ** The PCDS shall not be considered as a warranty by the Transferor/Seller.
- ** The PCDS is for "disclosure" purposes only and should NOT be included or become a part of any contract between the Transferor/Seller and the Transferee/Buyer.
- ** The PCDS may not be used as a substitute for a home inspection by a Mississippi Licensed Home Inspector or for the issuance of any Home Warranty Policy that the Transferor/Seller or Transferee/Buyer may obtain.

** The purchase or sale of any Appliances or items considered Personal Property should be negotiated by the Parties as part of the Contract of Sale and the ownership interest(s) should be transferred by a Bill of Sale.

LIMITATION TO EXCLUSIONS/EXEMPTIONS:

If, during the period of ownership, the Transferor/Seller has requested or authorized any repairs, has replaced or repaired any of the mechanical equipment, has initiated any action or activity which could be documented on the PCDS or has actual knowledge of information which might impact a transferee's/buyer's decision to purchase the residence, Transferors/Sellers are obligated to complete those specific portions of the PCDS which are applicable to that information.

A known (material) defect is a condition found within the property that was known by the Transferor/Seller at the time of the listing or was discovered prior to a transaction being finalized and the defect results in one of the following:

- (a) The defect has an adverse effect on the market value or marketability of the residence.
- (b) The defect significantly impairs the health or safety of future occupants of the residence.
- (c) If not repaired/removed/replaced, the defect shortens the expected normal life of the residence.

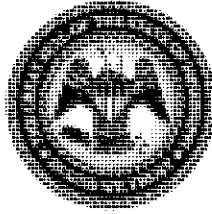
The Transferor/Seller is **REQUIRED** to sign the Property Condition Disclosure Statement when the transaction is finalized in order to verify and confirm that there have been no material changes to the residence since the original Disclosure Statement was executed by the seller(s).

CONFIRMATION OF UNDERSTANDING:

 2/14/2013
SELLER (UPON LISTING) DATE BUYER (BEFORE OFFER) DATE

SELLER (UPON LISTING) DATE BUYER (BEFORE OFFER) DATE

REPRESENTING THE SELLER(S) REPRESENTING THE BUYER(S)



PROPERTY CONDITION DISCLOSURE STATEMENT (PCDS)

THIS FORM MAY BE DUPLICATED BUT IT MAY NOT BE ALTERED OR PERSONALIZED BY THE SELLER(S), ANY BROKERAGE FIRM OR LICENSEE.

The following is a Property Condition Disclosure Statement (PCDS) required by §89-1-507 through §89-1-527 of the Mississippi Real Estate Brokers Act of 1954, as Amended, and made by the SELLER(S) concerning the condition of the RESIDENTIAL PROPERTY (1 TO 4 UNITS) located at: 1072 Old Hwy 67, D'Herstville, MS

SELLER(S): Sharon Kelzo Approximate Age of the Residence 98

This document is a disclosure of the condition of real property known by the SELLER on the date that this statement is signed and it is based on their actual knowledge of the property. It is **NOT a warranty of any kind** by the Seller or any Real Estate Licensee representing a principal in this transaction and this PCDS is not a substitute for any home inspection(s) or warranties the purchaser(s) may wish to obtain. However, the purchaser(s) may rely on the information contained herein when deciding to negotiate the terms for the purchase of the residential real property. This statement may be made available to other parties and **is to be attached to the Listing Agreement and signed by the SELLER(S)**. This statement is **NOT** intended to be part of any contract between the seller and the purchaser.

IF THE RESIDENCE IS NEW (NEVER OCCUPIED) OR PROPOSED RESIDENTIAL CONSTRUCTION and a real estate licensee is involved in the transaction, the BUILDER/OWNER/SELLER must complete the PCDS in its entirety and should reference specific plans/specifications, building material lists and/or change orders.

DO NOT LEAVE ANY QUESTIONS UNANSWERED AND DO NOT LEAVE BLANK SPACES. THE SELLER(S) MAY ATTACH ADDITIONAL PAGES IF NECESSARY TO FULLY EXPLAIN A PROPERTY'S CONDITION. THE ACRONYM "N/A" MAY BE USED FOR "NOT APPLICABLE" AND "UNK" MAY BE USED FOR "UNKNOWN".

A. GENERAL INFORMATION:

1. Does the Transferor/Seller currently have a deeded title to the residence? Yes No . If "YES", when did the current Seller receive the title to the property? Beneficial Bank, 2017
2. Does the Transferor/Seller currently occupy the residence? Yes No . If "NO", has the current seller ever occupied the residence? Yes No . If "YES", what were the dates of Occupancy? _____
3. Is the site improved with a Factory Built (Manufactured Housing Unit) or a Modular Home constructed on a permanent foundation? Yes No . If "YES", indicate the Home Identification number on the Data Plate _____
4. Was the residence built in conformity with an approved building code? Yes No Unknown If "YES", was a PERMIT secured from the City/County Building Authority? Yes No Unknown
5. Do you have a Home Inspection Report which was completed for you? Yes No . If "YES", is the report available for review by a prospective purchaser? Yes No

B. STRUCTURAL ITEMS & SOILS:

1. Are you aware of any settlement/heaving of soils, any collapsible or expansive soils or poorly compacted fill on the Property? Yes _____ No _____ Unknown . If "YES", please describe, to your knowledge, the nature and location of any settlement or heaving _____
2. Are you aware of any past or present movement, shifting, deterioration or other problems with the walls (interior or exterior) or the foundation of the Property? Yes _____ No Unknown _____ . If "YES", please describe, to your knowledge, the nature and location of any such problems _____
3. Are you aware of any tests to determine the composition/compaction of the soil or the presence of any "expandable soils" being present on the Property? Yes _____ No . If "YES", please provide copies of the results if they are available.
4. Are you aware of any foundation repairs made in the past? Yes _____ No . If "Yes", is there a written report which will indicate the foundation repairs? Explain _____
5. If foundation repairs were completed is there a Warranty which can be transferred to a new owner? Yes _____ No .
6. To your knowledge, are any foundation repairs currently needed? Yes _____ No _____ Unknown . If "YES", please explain in detail _____
7. Except for "Cosmetic Upgrades" (carpet, paint, wallpaper, etc) have you remodeled, made any room additions, made structural modifications or other alterations or improvements to the Property? If "YES", please describe, to your knowledge, the nature of all such remodels/alterations _____
8. To your knowledge, were all necessary work PERMITS and approvals secured in compliance with local/city/county building codes? Yes _____ No _____ Unknown . If "YES", please indicate the name of the Licensed Contractor who completed the work and the dates of the work _____

C. ROOF:

1. Has all or any portion of the roof been repaired or replaced during your ownership? Yes _____ No . If "YES", please indicate the dates of the roof work (if known) and describe, to the best of your knowledge, the nature of any roof repairs or replacements. _____
2. To your knowledge, are there any written warranties presently in place for the roof? Yes _____ No . If "YES", please attach copies of any warranties in your possession.
3. Are you aware of any current leaks or defects with the roof such as structural issues, dry rot, water backups, moisture issues, wind damage or hail damage? Yes No . If "YES", please describe, to your knowledge, the nature of the defects and their location Rain Roof has leak
4. How long have you known about the current problems with the roof? 12 months
5. The roof is ? years old.

D. HISTORY OF INFESTATION: TERMITES, CARPENTER ANTS, ETC:

1. Are you aware of any ongoing, recurring or habitual problems with termites, dry rot, mildew, vermin, rodents or other pests which affect the Property? Yes No _____ . If "YES", please describe, to your knowledge, the nature of the problem and the location of the problem Rain Roof & walls beneath
2. Are you aware of any DAMAGE to the Property which was caused by termites, dry rot, mildew, vermin, rodents or other pests? Yes No _____ . If "YES", please describe, to your knowledge, the location of such damage and what efforts were taken to mitigate and/or repair the damage Rain Roof & walls Beneath
3. If a Wood Destroying Insect Treatment was required for the residence, which Pest Control Company treated the Property for the problem? Starks
4. If DAMAGE to the residence was actually mitigated/repaired, who was the contractor who repaired the DAMAGE to the Property? Starks
5. To your knowledge, are there any written warranties or other termite or pest control coverage(s) presently in place for the Property? Yes No _____ . If "YES", please attach copies of such warranties in your possession. Starks

E. STRUCTURE/FLOOR/WALLS/CEILINGS/WINDOWS/FEATURES:

1. During your ownership, has there been DAMAGE to any portion of the physical structure resulting from fire, windstorm, hail, tornados, hurricane or any other natural disaster? Yes _____ No . If "YES", please describe, to your best knowledge, the cause of the damage, in detail, and supply the dates of the losses _____

2. Are you aware of any past or present problems, malfunctions or defects with the windows (including storm windows and screens), the flooring (hardwood, marble, stone, tile or carpeting), fireplace/chimneys, ceilings, walls (interior), jetted bathtub, hot tub, sauna, skylights, shower or wet bar; including any modifications to them? Yes _____ No . If "YES", please describe, to your knowledge, the nature of any such problem; for example, the skylight leaked or the motor which operates the jetted bathtub had to be replaced, etc. _____
3. Are you aware of any past or present problems, malfunctions or defects with the lawn sprinkler system, swimming pool, hot tub, rain gutters, tile drains (French drains), driveway, patio, storage building, gazebo, outdoor fireplace, or outdoor kitchen appliances (which are remaining with the property)? Yes _____ No . If "YES", please describe, to your knowledge, the nature of such problems; for example, the French drains are clogged and do not remove rain water or the timer for the sprinkler system is not functioning properly, etc. _____
4. During your ownership, have there been any notices concerning safety issues with a swimming pool or other improvements to the property? Yes _____ No . If "YES". Please describe, to the best of your knowledge, those safety issue in detail. _____
5. Except for regular maintenance of the exterior surfaces of the Property (painting, staining, etc) are you aware of any past or present problems, malfunctions or defects with any portion of the exterior walls, fascias, soffits, stucco, windows, doors or trim? Yes No _____ . If "YES", please describe, to your knowledge, the nature of the problems. (for example, there is moisture damage behind the stucco) Paper Roof and walls Beneath.

F. LAND AND SITE DATA:

1. Is there an engineer's survey or a recorded plat of the Property available? Yes _____ No . If "YES", please attach a copy of the survey (if available). If "YES", please indicate by whom the survey was completed _____ and the Date the survey was completed _____
2. Are you aware of the existence of any of the following, to wit:
- | | | | | | | | |
|----------------|-----------|--|---------------|--------------------|-----------|--|---------------|
| Encroachments: | Yes _____ | No <input checked="" type="checkbox"/> | Unknown _____ | Boundary Dispute: | Yes _____ | No <input checked="" type="checkbox"/> | Unknown _____ |
| Easements: | Yes _____ | No <input checked="" type="checkbox"/> | Unknown _____ | Soil/Erosion: | Yes _____ | No <input checked="" type="checkbox"/> | Unknown _____ |
| Soil Problems: | Yes _____ | No <input checked="" type="checkbox"/> | Unknown _____ | Standing Water: | Yes _____ | No <input checked="" type="checkbox"/> | Unknown _____ |
| Land Fill: | Yes _____ | No <input checked="" type="checkbox"/> | Unknown _____ | Drainage Problems: | Yes _____ | No <input checked="" type="checkbox"/> | Unknown _____ |
3. Are you aware of any current pending litigation, foreclosure, zoning regulations, restrictive covenants, building code violations, mechanics liens, judgments, special assessments or any other type of restriction which could negatively affect your Property? Yes _____ No If "YES", please explain _____
4. Other than the utility easements, are you aware of any easement which impacts the residence? Yes _____ No .
5. Are there any rights-of-way, easements, eminent domain proceedings or similar matters which may negatively impact your ownership interest in the Property? Yes _____ No If "YES", please explain _____
6. Are you aware if any portion of the Property (including a part of the site) is currently located in or near a FEMA Designated Flood Hazard Zone? Yes No _____ Unknown _____ . If "YES", please indicate the source of your information and the current Map Number used to determine the Flood Zone unk
7. Is Flood Insurance currently required on the Property? Yes No _____ If "YES", please indicate the amount of the premium currently being paid and when the premium was last adjusted \$535
8. Are you aware if any portion of the Property (Site) is currently designated as being located within a WETLANDS area and is subject to specific restrictive uses? Yes _____ No . If "YES", please explain in detail _____
9. Are you aware if the Property has ever had standing water in the front, rear or side yards for more than forty-eight (48) hours following a heavy rain? Yes _____ No . If "YES", please describe, to your knowledge, any unusual circumstances causing the problem _____
10. Are you aware, **FOR ANY REASON**, in the past or present of water penetration problems in the walls, windows, doors, crawl space, basement or attic? Yes No _____ . If "YES", please describe, to your knowledge, the nature of the problem and what steps were taken to remedy the problem Patio Roof & walls Beneath - Contractor
11. **FOR ANY REASON**, past or present, has any portion of the interior of the Property ever suffered water damage or moisture related damage which was caused by flooding, lot drainage, moisture seepage, condensation, sewer overflow, sewer backup, leaking or broken water pipes (during or after construction) pipe fittings, plumbing fixtures, leaking appliances, fixtures or equipment? Yes No _____ . If "YES", please describe, to your knowledge, the nature of the problems and what steps were taken to remedy the problems Patio Roof & walls Beneath.
12. Are you aware, **FOR ANY REASON**, of any leaks, back-ups, or other problems relating to any of the plumbing, water, sewage, or related items during your ownership? Yes _____ No . If "YES", please describe, to your best knowledge, the problem you experienced and how it as mitigated _____

G. APPLIANCES/MECHANICAL EQUIPMENT:

Following is a list of appliances and mechanical systems which may or may not be present in the residence. Please complete the information to the best of your knowledge. You may use the "Item Blanks" at the bottom of the page for additional items.

APPLIANCES/ITEMS/SYSTEMS REMAINING WITH THE PROPERTY:

ITEMS	YES/ #ITEMS	NO N/A	GAS/ ELECTRIC	REPAIRS COMPLETED IN LAST TWO YEARS	AGE
BUILT-IN COOKTOP	✓		E		
BUILT-IN OVEN(S)	✓		E		
BUILT-IN DISHWASHER	✓		E		
GARBAGE DISPOSAL	✓		E		
ICE-MAKER (STAND ALONE)					
MICROWAVE OVEN					
TRASH COMPACTOR					
KITCHEN VENT FAN(S)					
CENTRAL AIR SYSTEM(S)	✓		E		
CENTRAL HEATING SYSTEM(S)	✓		E		
HUMIDIFIERS OR EVAPORATORS					
AIR PURIFIERS					
WATER HEATER(S)	✓		E		
TANKLESS WATER HEATER(S)					
CEILING FAN(S)					
ATTIC FANS					
BATHROOM VENT FAN(S)					
GARAGE DOOR OPENER(S)					
SMOKE/MONOXIDE DETECTORS	✓		E		
SECURITY SYSTEM	✓		E		
INTERCOM/SOUND SYSTEM					
REFRIGERATOR					
FREE STANDING STOVE					

H. OTHER:

- 1. Are you aware of any past or present hazardous conditions, substances or materials on the Property such as asbestos or asbestos components, lead-based paint, urea-formaldehyde insulation, the presence of Chinese dry-wall, methane gas, radon gas, underground storage tanks and lines or any past industrial uses occurring on the premises? Yes _____ No If "YES", please describe, to your best knowledge, the nature of any such hazardous conditions and any attempts to mitigate any such hazardous condition(s) _____
- 2. Are you aware of any past or present contaminations which have resulted from the storing or the manufacturing of methamphetamines? Yes _____ No If "YES", please describe _____
- 3. Are you aware if there are currently, or have previously been, any inspections by qualified experts or orders issued on the property by any governmental authority requiring the remediation of MOLD or any other public health nuisance on the Property? Yes _____ No If "YES", please describe, to your best knowledge, any attempts to mitigate such condition(s) _____
- 4. Are you aware of any problems or conditions that affect the desirability or functionality of the Heating, Cooling, Electrical, Plumbing, or Mechanical Systems? Yes _____ No If "YES", please described, to your best knowledge, all known problems in complete detail _____
- 5. The water supply is: Public _____ Private _____ On-site Well Neighbor's Well _____ Community _____
- 6. If your drinking water is from a well, when was the water quality last checked for safety, what were the results of the test and who was the qualified entity who conducted the test? MAIL
- 7. Is the water supply equipped with a water softener? Yes _____ No _____ Unknown
- 8. The Sewage System is: Public Private _____ Septic _____ Cesspool _____ Treatment Plant _____ Other _____
- 9. If the sewer service is by an individual system, has it been inspected by the proper state/county Health Department officials? Yes _____ No _____ If "YES", please give complete details _____
- 10. How many bedrooms are allowed by the Individual Waste Water Permit? _____
- 11. Is there a sewage pump installed? Yes _____ No Date of the last Septic Inspection _____

I. MISCELLANEOUS:

- 1. Is the residence situated on Leasehold or Sixteenth Section land? Yes _____ No Unknown _____ If "YES", please indicate the terms of the lease including payments and expiration date _____
- 2. Are you aware of any hidden defects or needed repairs about which the purchaser should be informed **PRIOR** to their purchase? Yes _____ No If "YES", please describe, to your best knowledge, the problem(s) which need to be disclosed _____
- 3. What is the APPROXIMATE SQUARE FOOTAGE of the Heated and Cooled Living Area? 3856
- 4. How was the approximation of the Gross Living Area (square footage) determined? 9/6/16 Appraisal
- 5. Are there any finished hardwood floors beneath the floor coverings? Yes _____ No Unknown _____ If "YES", please indicate, to your best knowledge, the condition and the location of the hardwood floors 9/6/16 App
- 6. Are there Homeowner's Association Fees associated with ownership? Yes _____ No Amount _____ (Yr/Mth/Quarter)
- 7. Does the HOA levy dues or assessments for maintenance of common areas and/or other common expenses? no
- 8. Are you aware of any HOA, Public (municipal) special improvement district (PID) or other assessments that are presently owing or that have been approved but not yet levied against the Property? Yes _____ No If "YES", please indicate the tax (assessing) entity and the amount of the taxes/assessments _____
- 9. Please indicate the contact information for the HOA MA
- 10. What is the YEARLY Real Estate Tax Bill? County Taxes _____ City Taxes _____ Special District Taxes \$5189/yr
- 11. Has Homestead Exemption been filed for the **current** year? Yes _____ No Unknown _____
- 12. Are you aware of any additional tax exemptions which accrue to the Property? Yes _____ No Unknown _____ If "YES", please describe the exemptions and the amount of the tax _____
- 13. What is the average YEARLY Electric Bill? \$ 2000 What is the average YEARLY Gas Bill? \$ _____
- 14. Is the residence serviced by Propane (LP) Gas? If "YES", what is the average YEARLY Propane Bill? \$ _____
- 15. The Propane Tank is: Owned _____ Leased _____ If Leased, how much is the lease payment? \$ _____
- 16. Is Cable Television Service available at the site? Yes No _____ Service Provider _____
- 17. Is Fiber Optic Cable (Internet) available at the site? Yes No _____ Service Provider _____
- 18. List any item remaining with the Property which is financed separately from the mortgages MA

MECHANICAL EQUIPMENT WHICH IS CONSIDERED PERSONAL PROPERTY AND IS NOT CONVEYED BY DEED AS PART OF THE REAL PROPERTY SHOULD BE NEGOTIATED IN THE CONTRACT OF SALE OR OTHER SUCH INSTRUMENT IF THE ITEMS ARE TO REMAIN WITH THE RESIDENCE.

To the extent of the Seller's knowledge as a property owner, the Seller(s) acknowledges that the information contained above is true and accurate for those areas of the property listed. The owner(s) agree to save and hold the Broker harmless from all claims, disputes, litigation and/or judgments arising from any incorrect information supplied by the owner(s) or from any material fact known by the owner(s) which owner(s) fail to disclose except the Broker is not held harmless to the owner(s) in claims, disputes, litigation, or judgments arising from conditions of which the Broker had actual knowledge.

 2/21/2018
SELLER (UPON LISTING) DATE SELLER (UPON LISTING) DATE

SELLER (AT CLOSING) DATE SELLER (AT CLOSING) DATE

PROSPECTIVE PURCHASER'S SIGNATURE _____
PURCHASER(S) ACKNOWLEDGE RECEIPT OF REPORT DATE

EXHIBIT 101

From: [Cameron Bell](#)
To: [Brown, Jeffrey](#)
Subject: FW: 2 documents
Date: Monday, July 6, 2020 1:47:42 PM
Attachments: [image001.gif](#)
[ATT00001.htm](#)
[image002.jpg](#)
[ATT00002.htm](#)
[River House \[CSP\].pdf](#)
[ATT00003.htm](#)
[Hickman \[CSP\].pdf](#)
[ATT00004.htm](#)

Cameron C. Bell

Realtor | Broker | Attorney*

Cameron Bell Properties, Inc.

14335 Dedeaux Road

Gulfport, MS 39503

Cell [REDACTED]

Fax (800) 520-3445

www.cameronbellproperties.com

*Not actively practicing law.

From: Z112 Palazzo, Steven <[REDACTED]>
Sent: Wednesday, February 21, 2018 11:59 AM
To: cameronbel [REDACTED]
Subject: Fwd: 2 documents

Check these over and let's get them up today.

Farm \$425K

River House \$525K

Thanks.

SMP

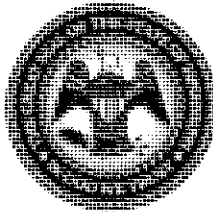
Sent from my iPad

Begin forwarded message:

From: "Philpot, Maurine" <[REDACTED]>
Date: February 21, 2018 at 11:51:39 AM CST
To: "Z112 Palazzo, Steven"
<[REDACTED]>
Subject: 2 documents



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INFORMATIONAL STATEMENT FOR MISSISSIPPI PROPERTY CONDITION

DISCLOSURE STATEMENT (PCDS)

In accordance with Sections 89-1-501 through 89-1-527 of the Mississippi Code of 1954, as amended, A TRANSFEROR/SELLER of real property consisting of not less than one (1) nor more than four (4) dwelling units shall provide a Property Condition Disclosure Statement when the transfer is by, or with the aid of, a duly licensed real estate broker or salesperson. The required Property Condition Disclosure Statement shall be in the form promulgated by the Mississippi Real Estate Commission (MREC) or on another form that contains the identical information. The Property Condition Disclosure Statement may not be personalized in any fashion. All "Forms" which have been promulgated and approved by the Real Estate Commission for use by licensees in real estate transactions may be found at www.mrec.ms.gov.

PURCHASER RIGHTS & CONSEQUENCES OF FAILURE TO DISCLOSE:

If the PCDS is delivered after the Transferee/Buyer has made an offer, the transferee may terminate any resulting real estate contract or withdraw any offer for a time period of three (3) days after the delivery in person or five (5) days after the delivery by deposit in mail. This termination or withdrawal will always be without penalty to the Transferee and any deposit or earnest money must be promptly returned to the prospective purchaser (despite any agreement to the contrary).

LICENSEE DUTIES & CONSEQUENCES OF FAILURE TO FULFILL DUTIES:

The Mississippi Statute requires real estate licensees to inform their clients of those clients' duties and rights in association with the completion of the Property Condition Disclosure Statement. The failure of any licensee to inform their client of the clients' responsibilities could subject the licensee (salesperson and broker) to censure, suspension, or revocation of their respective real estate licenses. The licensee is not liable for any error, inaccuracy or omission in a Property Condition Disclosure Statement UNLESS the licensee has actual knowledge of the error, inaccuracy or omission by the Transferor/Seller.

IMPORTANT PROVISIONS OF THE LAW:

- ** The PCDS shall not be considered as a warranty by the Transferor/Seller.
- ** The PCDS is for "disclosure" purposes only and should NOT be included or become a part of any contract between the Transferor/Seller and the Transferee/Buyer.
- ** The PCDS may not be used as a substitute for a home inspection by a Mississippi Licensed Home Inspector or for the issuance of any Home Warranty Policy that the Transferor/Seller or Transferee/Buyer may obtain.

** The purchase or sale of any Appliances or items considered Personal Property should be negotiated by the Parties as part of the Contract of Sale and the ownership interest(s) should be transferred by a Bill of Sale.

LIMITATION TO EXCLUSIONS/EXEMPTIONS:

If, during the period of ownership, the Transferor/Seller has requested or authorized any repairs, has replaced or repaired any of the mechanical equipment, has initiated any action or activity which could be documented on the PCDS or has actual knowledge of information which might impact a transferee's/buyer's decision to purchase the residence, Transferors/Sellers are obligated to complete those specific portions of the PCDS which are applicable to that information.

A known (material) defect is a condition found within the property that was known by the Transferor/Seller at the time of the listing or was discovered prior to a transaction being finalized and the defect results in one of the following:

- (a) The defect has an adverse effect on the market value or marketability of the residence.
- (b) The defect significantly impairs the health or safety of future occupants of the residence.
- (c) If not repaired/removed/replaced, the defect shortens the expected normal life of the residence.

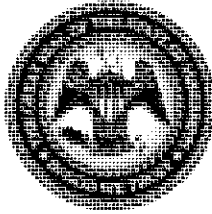
The Transferor/Seller is **REQUIRED** to sign the Property Condition Disclosure Statement when the transaction is finalized in order to verify and confirm that there have been no material changes to the residence since the original Disclosure Statement was executed by the seller(s).

CONFIRMATION OF UNDERSTANDING:

 2/22/2013
SELLER (UPON LISTING) DATE BUYER (BEFORE OFFER) DATE

SELLER (UPON LISTING) DATE BUYER (BEFORE OFFER) DATE

REPRESENTING THE SELLER(S) REPRESENTING THE BUYER(S)



PROPERTY CONDITION DISCLOSURE STATEMENT (PCDS)

THIS FORM MAY BE DUPLICATED BUT IT MAY NOT BE ALTERED OR PERSONALIZED BY THE SELLER(S), ANY BROKERAGE FIRM OR LICENSEE.

The following is a Property Condition Disclosure Statement (PCDS) required by §89-1-507 through §89-1-527 of the Mississippi Real Estate Brokers Act of 1954, as Amended, and made by the SELLER(S) concerning the condition of the RESIDENTIAL PROPERTY (1 TO 4 UNITS) located at: 11072 Old Hwy 67, D'Iberville, MS

SELLER(S): Steven Kelzo Approximate Age of the Residence 98

This document is a disclosure of the condition of real property known by the SELLER on the date that this statement is signed and it is based on their actual knowledge of the property. It is NOT a warranty of any kind by the Seller or any Real Estate Licensee representing a principal in this transaction and this PCDS is not a substitute for any home inspection(s) or warranties the purchaser(s) may wish to obtain. However, the purchaser(s) may rely on the information contained herein when deciding to negotiate the terms for the purchase of the residential real property. This statement may be made available to other parties and is to be attached to the Listing Agreement and signed by the SELLER(S). This statement is NOT intended to be part of any contract between the seller and the purchaser.

IF THE RESIDENCE IS NEW (NEVER OCCUPIED) OR PROPOSED RESIDENTIAL CONSTRUCTION and a real estate licensee is involved in the transaction, the BUILDER/OWNER/SELLER must complete the PCDS in its entirety and should reference specific plans/specifications, building material lists and/or change orders.

DO NOT LEAVE ANY QUESTIONS UNANSWERED AND DO NOT LEAVE BLANK SPACES. THE SELLER(S) MAY ATTACH ADDITIONAL PAGES IF NECESSARY TO FULLY EXPLAIN A PROPERTY'S CONDITION. THE ACRONYM "N/A" MAY BE USED FOR "NOT APPLICABLE" AND "UNK" MAY BE USED FOR "UNKNOWN".

A. GENERAL INFORMATION:

1. Does the Transferor/Seller currently have a deeded title to the residence? Yes No . If "YES", when did the current Seller receive the title to the property? Benefcorp South
2. Does the Transferor/Seller currently occupy the residence? Yes No . If "NO", has the current seller ever occupied the residence? Yes No . If "YES", what were the dates of Occupancy? _____
3. Is the site improved with a Factory Built (Manufactured Housing Unit) or a Modular Home constructed on a permanent foundation? Yes No . If "YES", indicate the Home Identification number on the Data Plate _____
4. Was the residence built in conformity with an approved building code? Yes No Unknown If "YES", was a PERMIT secured from the City/County Building Authority? Yes No Unknown
5. Do you have a Home Inspection Report which was completed for you? Yes No . If "YES", is the report available for review by a prospective purchaser? Yes No

B. STRUCTURAL ITEMS & SOILS:

1. Are you aware of any settlement/heaving of soils, any collapsible or expansive soils or poorly compacted fill on the Property? Yes _____ No _____ Unknown . If "YES", please describe, to your knowledge, the nature and location of any settlement or heaving _____ .
2. Are you aware of any past or present movement, shifting, deterioration or other problems with the walls (interior or exterior) or the foundation of the Property? Yes _____ No Unknown _____ . If "YES", please describe, to your knowledge, the nature and location of any such problems _____ .
3. Are you aware of any tests to determine the composition/compaction of the soil or the presence of any "expandable soils" being present on the Property? Yes _____ No . If "YES", please provide copies of the results if they are available.
4. Are you aware of any foundation repairs made in the past? Yes _____ No _____ . If "Yes", is there a written report which will indicate the foundation repairs? Explain _____ .
5. If foundation repairs were completed is there a Warranty which can be transferred to a new owner? Yes _____ No _____ .
6. To your knowledge, are any foundation repairs currently needed? Yes _____ No _____ Unknown . If "YES", please explain in detail _____ .
7. Except for "Cosmetic Upgrades" (carpet, paint, wallpaper, etc) have you remodeled, made any room additions, made structural modifications or other alterations or improvements to the Property? If "YES", please describe, to your knowledge, the nature of all such remodels/alterations _____ .
8. To your knowledge, were all necessary work PERMITS and approvals secured in compliance with local/city/county building codes? Yes _____ No _____ Unknown _____ . If "YES", please indicate the name of the Licensed Contractor who completed the work and the dates of the work _____ .

C. ROOF:

1. Has all or any portion of the roof been repaired or replaced during your ownership? Yes _____ No . If "YES", please indicate the dates of the roof work (if known) and describe, to the best of your knowledge, the nature of any roof repairs or replacements. _____ .
2. To your knowledge, are there any written warranties presently in place for the roof? Yes _____ No . If "YES", please attach copies of any warranties in your possession.
3. Are you aware of any current leaks or defects with the roof such as structural issues, dry rot, water backups, moisture issues, wind damage or hail damage? Yes No . If "YES", please describe, to your knowledge, the nature of the defects and their location Patio Roof has leak. _____ .
4. How long have you known about the current problems with the roof? _____ .
5. The roof is 7 years old.

D. HISTORY OF INFESTATION: TERMITES, CARPENTER ANTS, ETC:

1. Are you aware of any ongoing, recurring or habitual problems with termites, dry rot, mildew, vermin, rodents or other pests which affect the Property? Yes No _____ . If "YES", please describe, to your knowledge, the nature of the problem and the location of the problem Patio Roof smells beneath. _____ .
2. Are you aware of any DAMAGE to the Property which was caused by termites, dry rot, mildew, vermin, rodents or other pests? Yes No _____ . If "YES", please describe, to your knowledge, the location of such damage and what efforts were taken to mitigate and/or repair the damage Patio Roof smells Beneath. _____ .
3. If a Wood Destroying Insect Treatment was required for the residence, which Pest Control Company treated the Property for the problem? Starkes _____ .
4. If DAMAGE to the residence was actually mitigated/repaired, who was the contractor who repaired the DAMAGE to the Property? Starkes _____ .
5. To your knowledge, are there any written warranties or other termite or pest control coverage(s) presently in place for the Property? Yes No _____ . If "YES", please attach copies of such warranties in your possession. Starkes

E. STRUCTURE/FLOOR/WALLS/CEILINGS/WINDOWS/FEATURES:

1. During your ownership, has there been DAMAGE to any portion of the physical structure resulting from fire, windstorm, hail, tornados, hurricane or any other natural disaster? Yes _____ No . If "YES", please describe, to your best knowledge, the cause of the damage, in detail, and supply the dates of the losses _____ .

2. Are you aware of any past or present problems, malfunctions or defects with the windows (including storm windows and screens), the flooring (hardwood, marble, stone, tile or carpeting), fireplace/chimneys, ceilings, walls (interior), jetted bathtub, hot tub, sauna, skylights, shower or wet bar; including any modifications to them? Yes _____ No . If "YES", please describe, to your knowledge, the nature of any such problem; for example, the skylight leaked or the motor which operates the jetted bathtub had to be replaced, etc. _____
3. Are you aware of any past or present problems, malfunctions or defects with the lawn sprinkler system, swimming pool, hot tub, rain gutters, tile drains (French drains), driveway, patio, storage building, gazebo, outdoor fireplace, or outdoor kitchen appliances (which are remaining with the property)? Yes _____ No . If "YES", please describe, to your knowledge, the nature of such problems; for example, the French drains are clogged and do not remove rain water or the timer for the sprinkler system is not functioning properly, etc. _____
4. During your ownership, have there been any notices concerning safety issues with a swimming pool or other improvements to the property? Yes _____ No . If "YES". Please describe, to the best of your knowledge, those safety issue in detail. _____
5. Except for regular maintenance of the exterior surfaces of the Property (painting, staining, etc) are you aware of any past or present problems, malfunctions or defects with any portion of the exterior walls, fascias, soffits, stucco, windows, doors or trim? Yes No _____ . If "YES", please describe, to your knowledge, the nature of the problems. (for example, there is moisture damage behind the stucco) Water Leak and walls Beneath.

F. LAND AND SITE DATA:

1. Is there an engineer's survey or a recorded plat of the Property available? Yes _____ No _____ . If "YES", please attach a copy of the survey (if available). If "YES", please indicate by whom the survey was completed _____ and the Date the survey was completed _____
2. Are you aware of the existence of any of the following, to wit:
- | | | | | | |
|----------------|--|---------------|--------------------|--|---------------|
| Encroachments: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ | Boundary Dispute: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ |
| Easements: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ | Soil/Erosion: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ |
| Soil Problems: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ | Standing Water: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ |
| Land Fill: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ | Drainage Problems: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ |
3. Are you aware of any current pending litigation, foreclosure, zoning regulations, restrictive covenants, building code violations, mechanics liens, judgments, special assessments or any other type of restriction which could negatively affect your Property? Yes _____ No . If "YES", please explain _____
4. Other than the utility easements, are you aware of any easement which impacts the residence? Yes _____ No .
5. Are there any rights-of-way, easements, eminent domain proceedings or similar matters which may negatively impact your ownership interest in the Property? Yes _____ No . If "YES", please explain _____
6. Are you aware if any portion of the Property (including a part of the site) is currently located in or near a FEMA Designated Flood Hazard Zone? Yes _____ No _____ Unknown _____ . If "YES", please indicate the source of your information and the current Map Number used to determine the Flood Zone _____
7. Is Flood Insurance currently required on the Property? Yes _____ No _____ . If "YES", please indicate the amount of the premium currently being paid and when the premium was last adjusted _____
8. Are you aware if any portion of the Property (Site) is currently designated as being located within a WETLANDS area and is subject to specific restrictive uses? Yes _____ No . If "YES", please explain in detail _____
9. Are you aware if the Property has ever had standing water in the front, rear or side yards for more than forty-eight (48) hours following a heavy rain? Yes _____ No . If "YES", please describe, to your knowledge, any unusual circumstances causing the problem _____
10. Are you aware, **FOR ANY REASON**, in the past or present of water penetration problems in the walls, windows, doors, crawl space, basement or attic? Yes No _____ . If "YES", please describe, to your knowledge, the nature of the problem and what steps were taken to remedy the problem Water Leak & walls Beneath - Contractor
11. **FOR ANY REASON**, past or present, has any portion of the interior of the Property ever suffered water damage or moisture related damage which was caused by flooding, lot drainage, moisture seepage, condensation, sewer overflow, sewer backup, leaking or broken water pipes (during or after construction) pipe fittings, plumbing fixtures, leaking appliances, fixtures or equipment? Yes No _____ . If "YES", please describe, to your knowledge, the nature of the problems and what steps were taken to remedy the problems Water Leak & walls Beneath
12. Are you aware, **FOR ANY REASON**, of any leaks, back-ups, or other problems relating to any of the plumbing, water, sewage, or related items during your ownership? Yes _____ No . If "YES", please describe, to your best knowledge, the problem you experienced and how it was mitigated _____

G. APPLIANCES/MECHANICAL EQUIPMENT:

Following is a list of appliances and mechanical systems which may or may not be present in the residence. Please complete the information to the best of your knowledge. You may use the "Item Blanks" at the bottom of the page for additional items.

APPLIANCES/ITEMS/SYSTEMS REMAINING WITH THE PROPERTY:

ITEMS	YES/ #ITEMS	NO N/A	GAS/ ELECTRIC	REPAIRS COMPLETED IN LAST TWO YEARS	AGE
BUILT-IN COOKTOP					
BUILT-IN OVEN(S)					
BUILT-IN DISHWASHER	✓		E		
GARBAGE DISPOSAL	✓		E		
ICE-MAKER (STAND ALONE)					
MICROWAVE OVEN					
TRASH COMPACTOR					
KITCHEN VENT FAN(S)					
CENTRAL AIR SYSTEM(S)	✓		E		
CENTRAL HEATING SYSTEM(S)	✓		E		
HUMIDIFIERS OR EVAPORATORS					
AIR PURIFIERS					
WATER HEATER(S)	✓		E		
TANKLESS WATER HEATER(S)					
CEILING FAN(S)					
ATTIC FANS					
BATHROOM VENT FAN(S)					
GARAGE DOOR OPENER(S)					
SMOKE/MONOXIDE DETECTORS	✓		E		
SECURITY SYSTEM	✓		E		
INTERCOM/SOUND SYSTEM					
REFRIGERATOR					
FREE STANDING STOVE					

H. OTHER:

- 1. Are you aware of any past or present hazardous conditions, substances or materials on the Property such as asbestos or asbestos components, lead-based paint, urea-formaldehyde insulation, the presence of Chinese dry-wall, methane gas, radon gas, underground storage tanks and lines or any past industrial uses occurring on the premises? Yes _____ No If "YES", please describe, to your best knowledge, the nature of any such hazardous conditions and any attempts to mitigate any such hazardous condition(s) _____
- 2. Are you aware of any past or present contaminations which have resulted from the storing or the manufacturing of methamphetamines? Yes _____ No If "YES", please describe _____
- 3. Are you aware if there are currently, or have previously been, any inspections by qualified experts or orders issued on the property by any governmental authority requiring the remediation of MOLD or any other public health nuisance on the Property? Yes _____ No If "YES", please describe, to your best knowledge, any attempts to mitigate such condition(s) _____
- 4. Are you aware of any problems or conditions that affect the desirability or functionality of the Heating, Cooling, Electrical, Plumbing, or Mechanical Systems? Yes _____ No If "YES", please described, to your best knowledge, all known problems in complete detail _____
- 5. The water supply is: Public _____ Private _____ On-site Well Neighbor's Well _____ Community _____
- 6. If your drinking water is from a well, when was the water quality last checked for safety, what were the results of the test and who was the qualified entity who conducted the test? unil
- 7. Is the water supply equipped with a water softener? Yes _____ No _____ Unknown
- 8. The Sewage System is: Public Private _____ Septic _____ Cesspool _____ Treatment Plant _____ Other _____
- 9. If the sewer service is by an individual system, has it been inspected by the proper state/county Health Department officials? Yes _____ No _____ If "YES", please give complete details _____
- 10. How many bedrooms are allowed by the Individual Waste Water Permit? _____
- 11. Is there a sewage pump installed? Yes _____ No Date of the last Septic Inspection _____

I. MISCELLANEOUS:

- 1. Is the residence situated on Leasehold or Sixteenth Section land? Yes _____ No Unknown _____ If "YES", please indicate the terms of the lease including payments and expiration date _____
- 2. Are you aware of any hidden defects or needed repairs about which the purchaser should be informed **PRIOR** to their purchase? Yes _____ No If "YES", please describe, to your best knowledge, the problem(s) which need to be disclosed _____
- 3. What is the **APPROXIMATE SQUARE FOOTAGE** of the Heated and Cooled Living Area? 3842
- 4. How was the approximation of the Gross Living Area (square footage) determined? _____
- 5. Are there any finished hardwood floors beneath the floor coverings? Yes _____ No Unknown _____ If "YES", please indicate, to your best knowledge, the condition and the location of the hardwood floors _____
- 6. Are there Homeowner's Association Fees associated with ownership? Yes _____ No Amount _____ (Yr/Mth/Quarter)
- 7. Does the HOA levy dues or assessments for maintenance of common areas and/or other common expenses? _____
- 8. Are you aware of any HOA, Public (municipal) special improvement district (PID) or other assessments that are presently owing or that have been approved but not yet levied against the Property? Yes _____ No If "YES", please indicate the tax (assessing) entity and the amount of the taxes/assessments _____
- 9. Please indicate the contact information for the HOA _____
- 10. What is the **YEARLY** Real Estate Tax Bill? County Taxes _____ City Taxes _____ Special District Taxes \$5173.72
- 11. Has Homestead Exemption been filed for the **current** year? Yes _____ No _____ Unknown _____
- 12. Are you aware of any additional tax exemptions which accrue to the Property? Yes _____ No Unknown _____ If "YES", please describe the exemptions and the amount of the tax _____
- 13. What is the average **YEARLY** Electric Bill? \$ 2600 . What is the average **YEARLY** Gas Bill? \$ _____
- 14. Is the residence serviced by Propane (LP) Gas? If "YES", what is the average **YEARLY** Propane Bill? \$ _____
- 15. The Propane Tank is: Owned _____ Leased _____ If Leased, how much is the lease payment? \$ _____
- 16. Is Cable Television Service available at the site? Yes No _____ Service Provider _____
- 17. Is Fiber Optic Cable (Internet) available at the site? Yes No _____ Service Provider _____
- 18. List any item remaining with the Property which is financed separately from the mortgages _____

MECHANICAL EQUIPMENT WHICH IS CONSIDERED PERSONAL PROPERTY AND IS NOT CONVEYED BY DEED AS PART OF THE REAL PROPERTY SHOULD BE NEGOTIATED IN THE CONTRACT OF SALE OR OTHER SUCH INSTRUMENT IF THE ITEMS ARE TO REMAIN WITH THE RESIDENCE.

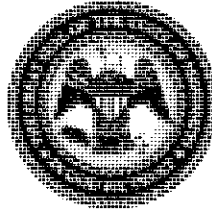
To the extent of the Seller's knowledge as a property owner, the Seller(s) acknowledges that the information contained above is true and accurate for those areas of the property listed. The owner(s) agree to save and hold the Broker harmless from all claims, disputes, litigation and/or judgments arising from any incorrect information supplied by the owner(s) or from any material fact known by the owner(s) which owner(s) fail to disclose except the Broker is not held harmless to the owner(s) in claims, disputes, litigation, or judgments arising from conditions of which the Broker had actual knowledge.

	<u>2/21/2018</u>		
SELLER (UPON LISTING)	DATE	SELLER (UPON LISTING)	DATE

_____	_____	_____	_____
SELLER (AT CLOSING)	DATE	SELLER (AT CLOSING)	DATE

PROSPECTIVE PURCHASER'S SIGNATURE _____	PURCHASER(S) ACKNOWLEDGE RECEIPT OF REPORT _____	DATE _____
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Hickman



**INFORMATIONAL STATEMENT FOR MISSISSIPPI PROPERTY CONDITION
DISCLOSURE STATEMENT (PCDS)**

In accordance with Sections 89-1-501 through 89-1-527 of the Mississippi Code of 1954, as amended, A TRANSFEROR/SELLER of real property consisting of not less than one (1) nor more than four (4) dwelling units shall provide a Property Condition Disclosure Statement when the transfer is by, or with the aid of, a duly licensed real estate broker or salesperson. The required Property Condition Disclosure Statement shall be in the form promulgated by the Mississippi Real Estate Commission (MREC) or on another form that contains the identical information. The Property Condition Disclosure Statement may not be personalized in any fashion. All "Forms" which have been promulgated and approved by the Real Estate Commission for use by licensees in real estate transactions may be found at www.mrec.ms.gov.

PURCHASER RIGHTS & CONSEQUENCES OF FAILURE TO DISCLOSE:

If the PCDS is delivered after the Transferee/Buyer has made an offer, the transferee may terminate any resulting real estate contract or withdraw any offer for a time period of three (3) days after the delivery in person or five (5) days after the delivery by deposit in mail. This termination or withdrawal will always be without penalty to the Transferee and any deposit or earnest money must be promptly returned to the prospective purchaser (despite any agreement to the contrary).

LICENSEE DUTIES & CONSEQUENCES OF FAILURE TO FULFILL DUTIES:

The Mississippi Statute requires real estate licensees to inform their clients of those clients' duties and rights in association with the completion of the Property Condition Disclosure Statement. The failure of any licensee to inform their client of the clients' responsibilities could subject the licensee (salesperson and broker) to censure, suspension, or revocation of their respective real estate licenses. The licensee is not liable for any error, inaccuracy or omission in a Property Condition Disclosure Statement UNLESS the licensee has actual knowledge of the error, inaccuracy or omission by the Transferor/Seller.

IMPORTANT PROVISIONS OF THE LAW:

- ** The PCDS shall not be considered as a warranty by the Transferor/Seller.
- ** The PCDS is for "disclosure" purposes only and should NOT be included or become a part of any contract between the Transferor/Seller and the Transferee/Buyer.
- ** The PCDS may not be used as a substitute for a home inspection by a Mississippi Licensed Home Inspector or for the issuance of any Home Warranty Policy that the Transferor/Seller or Transferee/Buyer may obtain.

** The purchase or sale of any Appliances or items considered Personal Property should be negotiated by the Parties as part of the Contract of Sale and the ownership interest(s) should be transferred by a Bill of Sale.

LIMITATION TO EXCLUSIONS/EXEMPTIONS:

If, during the period of ownership, the Transferor/Seller has requested or authorized any repairs, has replaced or repaired any of the mechanical equipment, has initiated any action or activity which could be documented on the PCDS or has actual knowledge of information which might impact a transferee's/buyer's decision to purchase the residence, Transferors/Sellers are obligated to complete those specific portions of the PCDS which are applicable to that information.

A known (material) defect is a condition found within the property that was known by the Transferor/Seller at the time of the listing or was discovered prior to a transaction being finalized and the defect results in one of the following:

- (a) The defect has an adverse effect on the market value or marketability of the residence.
- (b) The defect significantly impairs the health or safety of future occupants of the residence.
- (c) If not repaired/removed/replaced, the defect shortens the expected normal life of the residence.

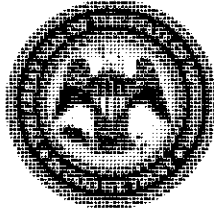
The Transferor/Seller is **REQUIRED** to sign the Property Condition Disclosure Statement when the transaction is finalized in order to verify and confirm that there have been no material changes to the residence since the original Disclosure Statement was executed by the seller(s).

CONFIRMATION OF UNDERSTANDING:

 2/21/2019
SELLER (UPON LISTING) DATE BUYER (BEFORE OFFER) DATE

SELLER (UPON LISTING) DATE BUYER (BEFORE OFFER) DATE

REPRESENTING THE SELLER(S) REPRESENTING THE BUYER(S)



PROPERTY CONDITION DISCLOSURE STATEMENT (PCDS)

THIS FORM MAY BE DUPLICATED BUT IT MAY NOT BE ALTERED OR PERSONALIZED BY THE SELLER(S), ANY BROKERAGE FIRM OR LICENSEE.

The following is a Property Condition Disclosure Statement (PCDS) required by §89-1-507 through §89-1-527 of the Mississippi Real Estate Brokers Act of 1954, as Amended, and made by the SELLER(S) concerning the condition of the RESIDENTIAL PROPERTY (1 TO 4 UNITS) located at: 45 Hickman Lane Road, Rockwood MS

SELLER(S): Steven Palmer Approximate Age of the Residence 48

This document is a disclosure of the condition of real property known by the SELLER on the date that this statement is signed and it is based on their actual knowledge of the property. It is **NOT a warranty of any kind** by the Seller or any Real Estate Licensee representing a principal in this transaction and this PCDS is not a substitute for any home inspection(s) or warranties the purchaser(s) may wish to obtain. However, the purchaser(s) may rely on the information contained herein when deciding to negotiate the terms for the purchase of the residential real property. This statement may be made available to other parties and **is to be attached to the Listing Agreement and signed by the SELLER(S)**. This statement is **NOT** intended to be part of any contract between the seller and the purchaser.

IF THE RESIDENCE IS NEW (NEVER OCCUPIED) OR PROPOSED RESIDENTIAL CONSTRUCTION and a real estate licensee is involved in the transaction, the BUILDER/OWNER/SELLER must complete the PCDS in its entirety and should reference specific plans/specifications, building material lists and/or change orders.

DO NOT LEAVE ANY QUESTIONS UNANSWERED AND DO NOT LEAVE BLANK SPACES. THE SELLER(S) MAY ATTACH ADDITIONAL PAGES IF NECESSARY TO FULLY EXPLAIN A PROPERTY'S CONDITION. THE ACRONYM "N/A" MAY BE USED FOR "NOT APPLICABLE" AND "UNK" MAY BE USED FOR "UNKNOWN".

A. GENERAL INFORMATION:

1. Does the Transferor/Seller currently have a deeded title to the residence? Yes No . If "YES", when did the current Seller receive the title to the property? Barclay south.
2. Does the Transferor/Seller currently occupy the residence? Yes No . If "NO", has the current seller ever occupied the residence? Yes No . If "YES", what were the dates of Occupancy? _____
3. Is the site improved with a Factory Built (Manufactured Housing Unit) or a Modular Home constructed on a permanent foundation? Yes No . If "YES", indicate the Home Identification number on the Data Plate _____
4. Was the residence built in conformity with an approved building code? Yes No Unknown If "YES", was a PERMIT secured from the City/County Building Authority? Yes No Unknown
5. Do you have a Home Inspection Report which was completed for you? Yes No . If "YES", is the report available for review by a prospective purchaser? Yes No

B. STRUCTURAL ITEMS & SOILS:

- 1. Are you aware of any settlement/heaving of soils, any collapsible or expansive soils or poorly compacted fill on the Property? Yes _____ No Unknown _____. If "YES", please describe, to your knowledge, the nature and location of any settlement or heaving _____.
- 2. Are you aware of any past or present movement, shifting, deterioration or other problems with the walls (interior or exterior) or the foundation of the Property? Yes _____ No Unknown _____. If "YES", please describe, to your knowledge, the nature and location of any such problems _____.
- 3. Are you aware of any tests to determine the composition/compaction of the soil or the presence of any "expandable soils" being present on the Property? Yes _____ No . If "YES", please provide copies of the results if they are available.
- 4. Are you aware of any foundation repairs made in the past? Yes _____ No . If "Yes", is there a written report which will indicate the foundation repairs? Explain _____.
- 5. If foundation repairs were completed is there a Warranty which can be transferred to a new owner? Yes _____ No _____.
- 6. To your knowledge, are any foundation repairs currently needed? Yes _____ No Unknown _____. If "YES", please explain in detail _____.
- 7. Except for "Cosmetic Upgrades" (carpet, paint, wallpaper, etc) have you remodeled, made any room additions, made structural modifications or other alterations or improvements to the Property? If "YES", please describe, to your knowledge, the nature of all such remodels/alterations Renovated in 2013 _____.
- 8. To your knowledge, were all necessary work PERMITS and approvals secured in compliance with local/city/county building codes? Yes _____ No _____ Unknown . If "YES", please indicate the name of the Licensed Contractor who completed the work and the dates of the work _____.

C. ROOF:

- 1. Has all or any portion of the roof been repaired or replaced during your ownership? Yes _____ No . If "YES", please indicate the dates of the roof work (if known) and describe, to the best of your knowledge, the nature of any roof repairs or replacements. _____.
- 2. To your knowledge, are there any written warranties presently in place for the roof? Yes _____ No . If "YES", please attach copies of any warranties in your possession.
- 3. Are you aware of any current leaks or defects with the roof such as structural issues, dry rot, water backups, moisture issues, wind damage or hail damage? Yes _____ No . If "YES", please describe, to your knowledge, the nature of the defects and their location _____.
- 4. How long have you known about the current problems with the roof? _____.
- 5. The roof is _____ years old.

D. HISTORY OF INFESTATION: TERMITES, CARPENTER ANTS, ETC:

- 1. Are you aware of any ongoing, recurring or habitual problems with termites, dry rot, mildew, vermin, rodents or other pests which affect the Property? Yes _____ No . If "YES", please describe, to your knowledge, the nature of the problem and the location of the problem _____.
- 2. Are you aware of any DAMAGE to the Property which was caused by termites, dry rot, mildew, vermin, rodents or other pests? Yes _____ No . If "YES", please describe, to your knowledge, the location of such damage and what efforts were taken to mitigate and/or repair the damage _____.
- 3. If a Wood Destroying Insect Treatment was required for the residence, which Pest Control Company treated the Property for the problem? _____.
- 4. If DAMAGE to the residence was actually mitigated/repaired, who was the contractor who repaired the DAMAGE to the Property? _____.
- 5. To your knowledge, are there any written warranties or other termite or pest control coverage(s) presently in place for the Property? Yes No _____. If "YES", please attach copies of such warranties in your possession. STANIL

E. STRUCTURE/FLOOR/WALLS/CEILINGS/WINDOWS/FEATURES:

- 1. During your ownership, has there been DAMAGE to any portion of the physical structure resulting from fire, windstorm, hail, tornados, hurricane or any other natural disaster? Yes _____ No . If "YES", please describe, to your best knowledge, the cause of the damage, in detail, and supply the dates of the losses _____.

2. Are you aware of any past or present problems, malfunctions or defects with the windows (including storm windows and screens), the flooring (hardwood, marble, stone, tile or carpeting), fireplace/chimneys, ceilings, walls (interior), jetted bathtub, hot tub, sauna, skylights, shower or wet bar; including any modifications to them? Yes _____ No . If "YES", please describe, to your knowledge, the nature of any such problem; for example, the skylight leaked or the motor which operates the jetted bathtub had to be replaced, etc. _____
3. Are you aware of any past or present problems, malfunctions or defects with the lawn sprinkler system, swimming pool, hot tub, rain gutters, tile drains (French drains), driveway, patio, storage building, gazebo, outdoor fireplace, or outdoor kitchen appliances (which are remaining with the property)? Yes _____ No . If "YES", please describe, to your knowledge, the nature of such problems; for example, the French drains are clogged and do not remove rain water or the timer for the sprinkler system is not functioning properly, etc. _____
4. During your ownership, have there been any notices concerning safety issues with a swimming pool or other improvements to the property? Yes _____ No . If "YES". Please describe, to the best of your knowledge, those safety issue in detail. _____
5. Except for regular maintenance of the exterior surfaces of the Property (painting, staining, etc) are you aware of any past or present problems, malfunctions or defects with any portion of the exterior walls, fascias, soffits, stucco, windows, doors or trim? Yes _____ No . If "YES", please describe, to your knowledge, the nature of the problems. (for example, there is moisture damage behind the stucco) _____

F. LAND AND SITE DATA:

1. Is there an engineer's survey or a recorded plat of the Property available? Yes No _____ . If "YES", please attach a copy of the survey (if available). If "YES", please indicate by whom the survey was completed Seymour and the Date the survey was completed 2015 .
2. Are you aware of the existence of any of the following, to wit:
- | | | | | | |
|----------------|--|---------------|--------------------|--|---------------|
| Encroachments: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ | Boundary Dispute: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ |
| Easements: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ | Soil/Erosion: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ |
| Soil Problems: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ | Standing Water: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ |
| Land Fill: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ | Drainage Problems: | Yes _____ No <input checked="" type="checkbox"/> | Unknown _____ |
3. Are you aware of any current pending litigation, foreclosure, zoning regulations, restrictive covenants, building code violations, mechanics liens, judgments, special assessments or any other type of restriction which could negatively affect your Property? Yes _____ No . If "YES", please explain _____
4. Other than the utility easements, are you aware of any easement which impacts the residence? Yes _____ No .
5. Are there any rights-of-way, easements, eminent domain proceedings or similar matters which may negatively impact your ownership interest in the Property? Yes _____ No . If "YES", please explain _____
6. Are you aware if any portion of the Property (including a part of the site) is currently located in or near a FEMA Designated Flood Hazard Zone? Yes _____ No Unknown _____ . If "YES", please indicate the source of your information and the current Map Number used to determine the Flood Zone _____
7. Is Flood Insurance currently required on the Property? Yes _____ No . If "YES", please indicate the amount of the premium currently being paid and when the premium was last adjusted _____
8. Are you aware if any portion of the Property (Site) is currently designated as being located within a WETLANDS area and is subject to specific restrictive uses? Yes _____ No . If "YES", please explain in detail _____
9. Are you aware if the Property has ever had standing water in the front, rear or side yards for more than forty-eight (48) hours following a heavy rain? Yes _____ No . If "YES", please describe, to your knowledge, any unusual circumstances causing the problem _____
10. Are you aware, **FOR ANY REASON**, in the past or present of water penetration problems in the walls, windows, doors, crawl space, basement or attic? Yes _____ No . If "YES", please describe, to your knowledge, the nature of the problem and what steps were taken to remedy the problem _____
11. **FOR ANY REASON**, past or present, has any portion of the interior of the Property ever suffered water damage or moisture related damage which was caused by flooding, lot drainage, moisture seepage, condensation, sewer overflow, sewer backup, leaking or broken water pipes (during or after construction) pipe fittings, plumbing fixtures, leaking appliances, fixtures or equipment? Yes _____ No . If "YES", please describe, to your knowledge, the nature of the problems and what steps were taken to remedy the problems _____
12. Are you aware, **FOR ANY REASON**, of any leaks, back-ups, or other problems relating to any of the plumbing, water, sewage, or related items during your ownership? Yes _____ No . If "YES", please describe, to your best knowledge, the problem you experienced and how it as mitigated _____

G. APPLIANCES/MECHANICAL EQUIPMENT:

Following is a list of appliances and mechanical systems which may or may not be present in the residence. Please complete the information to the best of your knowledge. You may use the "Item Blanks" at the bottom of the page for additional items.

APPLIANCES/ITEMS/SYSTEMS REMAINING WITH THE PROPERTY:

ITEMS	YES/ #ITEMS	NO N/A	GAS/ ELECTRIC	REPAIRS COMPLETED IN LAST TWO YEARS	AGE
BUILT-IN COOKTOP	✓		✓ G		5 4
BUILT-IN OVEN(S)	✓		✓ G		5 4
BUILT-IN DISHWASHER	✓		✓ G		5 4
GARBAGE DISPOSAL	✓		✓ G		5 4
ICE-MAKER (STAND ALONE)					
MICROWAVE OVEN	✓		E		5 4
TRASH COMPACTOR					
KITCHEN VENT FAN(S)					
CENTRAL AIR SYSTEM(S)	✓		E		5 4
CENTRAL HEATING SYSTEM(S)	✓		E		5 4
HUMIDIFIERS OR EVAPORATORS					
AIR PURIFIERS					
WATER HEATER(S)	✓		G		5 4
TANKLESS WATER HEATER(S)					
CEILING FAN(S)	✓		E		5 4
ATTIC FANS					
BATHROOM VENT FAN(S)					
GARAGE DOOR OPENER(S)					
SMOKE/MONOXIDE DETECTORS					
SECURITY SYSTEM					
INTERCOM/SOUND SYSTEM					
REFRIGERATOR	✓		E		5 4
FREE STANDING STOVE					

H. OTHER:


- 1. Are you aware of any past or present hazardous conditions, substances or materials on the Property such as asbestos or asbestos components, lead-based paint, urea-formaldehyde insulation, the presence of Chinese dry-wall, methane gas, radon gas, underground storage tanks and lines or any past industrial uses occurring on the premises? Yes _____ No If "YES", please describe, to your best knowledge, the nature of any such hazardous conditions and any attempts to mitigate any such hazardous condition(s) _____
- 2. Are you aware of any past or present contaminations which have resulted from the storing or the manufacturing of methamphetamines? Yes _____ No If "YES", please describe _____
- 3. Are you aware if there are currently, or have previously been, any inspections by qualified experts or orders issued on the property by any governmental authority requiring the remediation of MOLD or any other public health nuisance on the Property? Yes _____ No If "YES", please describe, to your best knowledge, any attempts to mitigate such condition(s) _____
- 4. Are you aware of any problems or conditions that affect the desirability or functionality of the Heating, Cooling, Electrical, Plumbing, or Mechanical Systems? Yes _____ No If "YES", please described, to your best knowledge, all known problems in complete detail _____
- 5. The water supply is: Public _____ Private _____ On-site Well Neighbor's Well _____ Community _____
- 6. If your drinking water is from a well, when was the water quality last checked for safety, what were the results of the test and who was the qualified entity who conducted the test? unk
- 7. Is the water supply equipped with a water softener? Yes _____ No _____ Unknown
- 8. The Sewage System is: Public _____ Private _____ Septic Cesspool _____ Treatment Plant _____ Other _____
- 9. If the sewer service is by an individual system, has it been inspected by the proper state/county Health Department officials? Yes _____ No If "YES", please give complete details _____
- 10. How many bedrooms are allowed by the Individual Waste Water Permit? _____
- 11. Is there a sewage pump installed? Yes _____ No Date of the last Septic Inspection _____

I. MISCELLANEOUS:

- 1. Is the residence situated on Leasehold or Sixteenth Section land? Yes _____ No Unknown _____ . If "YES", please indicate the terms of the lease including payments and expiration date _____
- 2. Are you aware of any hidden defects or needed repairs about which the purchaser should be informed **PRIOR** to their purchase? Yes _____ No If "YES", please describe, to your best knowledge, the problem(s) which need to be disclosed _____
- 3. What is the **APPROXIMATE SQUARE FOOTAGE** of the Heated and Cooled Living Area? 2100
- 4. How was the approximation of the Gross Living Area (square footage) determined? _____
- 5. Are there any finished hardwood floors beneath the floor coverings? Yes _____ No Unknown _____ . If "YES", please indicate, to your best knowledge, the condition and the location of the hardwood floors _____
- 6. Are there Homeowner's Association Fees associated with ownership? Yes _____ No Amount _____ (Yr/Mth/Quarter)
- 7. Does the HOA levy dues or assessments for maintenance of common areas and/or other common expenses? _____
- 8. Are you aware of any HOA, Public (municipal) special improvement district (**PID**) or other assessments that are presently owing or that have been approved but not yet levied against the Property? Yes _____ No If "YES", please indicate the tax (assessing) entity and the amount of the taxes/assessments _____
- 9. Please indicate the contact information for the HOA _____
- 10. What is the **YEARLY** Real Estate Tax Bill? County Taxes 2593 City Taxes _____ Special District Taxes _____
- 11. Has Homestead Exemption been filed for the **current** year? Yes _____ No Unknown _____
- 12. Are you aware of any additional tax exemptions which accrue to the Property? Yes _____ No Unknown _____ . If "YES", please describe the exemptions and the amount of the tax _____
- 13. What is the average **YEARLY** Electric Bill? \$ 1200 . What is the average **YEARLY** Gas Bill? \$ 300
- 14. Is the residence serviced by Propane (LP) Gas? If "YES", what is the average **YEARLY** Propane Bill? \$ 300
- 15. The Propane Tank is: Owned _____ Leased If Leased, how much is the lease payment? \$ _____
- 16. Is Cable Television Service available at the site? Yes _____ No Service Provider _____
- 17. Is Fiber Optic Cable (Internet) available at the site? Yes _____ No Service Provider _____
- 18. List any item remaining with the Property which is financed separately from the mortgages _____

MECHANICAL EQUIPMENT WHICH IS CONSIDERED PERSONAL PROPERTY AND IS NOT CONVEYED BY DEED AS PART OF THE REAL PROPERTY SHOULD BE NEGOTIATED IN THE CONTRACT OF SALE OR OTHER SUCH INSTRUMENT IF THE ITEMS ARE TO REMAIN WITH THE RESIDENCE.

To the extent of the Seller's knowledge as a property owner, the Seller(s) acknowledges that the information contained above is true and accurate for those areas of the property listed. The owner(s) agree to save and hold the Broker harmless from all claims, disputes, litigation and/or judgments arising from any incorrect information supplied by the owner(s) or from any material fact known by the owner(s) which owner(s) fail to disclose except the Broker is not held harmless to the owner(s) in claims, disputes, litigation, or judgments arising from conditions of which the Broker had actual knowledge.

 2/21/10
SELLER (UPON LISTING) DATE

SELLER (UPON LISTING) DATE

SELLER (AT CLOSING) DATE

SELLER (AT CLOSING) DATE

PROSPECTIVE PURCHASER'S SIGNATURE

PURCHASER(S) ACKNOWLEDGE RECEIPT OF REPORT DATE

