STATEMENT

STATEMENT DATE	ACCOUNT NO.

DATE PAID _____ CHEQUE NO. _____ AMOUNT _____

TRANSACTION DATE	INVOICE NO.	DESCRIPTION	AMOUNT	BALANCE
				TOTAL

REMITTANCE ADVICE

STATEMENT DATE	ACCOUNT NO.

PLEASE RETURN THIS PORTION
WITH YOUR PAYMENT

AMOUNT REMITTED $_____

IF PAYING BY INVOICE - PLEASE
CHECK INDIVIDUAL INVOICES PAID

INVOICE NO.	AMOUNT DUE	√
	TOTAL	
BALANCE DUE		

MADE IN CANADA

QE 20-12

Proof Proof Proof