STATEMENT

INVOICE NUMBER	DATE	DESCRIPTION	DUE DATE	AMOUNT
			TOTAL BALANCE	

CURRENT	PAST DUE 1-30	PAST DUE 31-60	PAST DUE > 60

REMITTANCE ADVICE

DO NOT PLACE TEXT IN THIS AREA
DELETE THIS BOX & TEXT BEFORE PRINTING

TO INSURE PROPER CREDIT PLEASE CHECK THOSE ITEMS BEING PAID IN THE "✓" COLUMN. PLEASE FILL IN THE AMOUNT PAID COLUMN IF MAKING PARTIAL PAYMENTS.

INVOICE NUMBER	AMOUNT PAID	✓
TOTAL BALANCE		

Proof Proof Proof