

STATEMENT

Bill To: [Customer Name]

[Street Address]
[City, ST ZIP]
[Phone]

Statement Date
Statement #
Customer ID

4/30/2012 [100] [ABC123]

Remittance	Account Summary

To ensure proper credit, please enclose a copy of this statement

Balance Due Payment Due Date

Amount Enclosed \$

\$0.00

with your check and remit to:

[Company Name] [Street Address]

[City, ST Zip]

Please write your Customer ID on your check.

Make all checks payable to [Company Name]

Account Activity

DATE	ТҮРЕ	INVOICE	DESCRIPTION	PAYMENT	AMOUNT	BALANCE
				Curre	nt Balance:	\$0.00

If you have any questions about this invoice, please contact [Name], [Street Address], [City, ST Zip]
Phone [000-000-0000], Fax [000-000-0000], [Email]

Thank You For Your Business!