STATEMENT OF ACCOUNT

Statement Date	
Account Number	

Bill To:

Remit Payment To:

INVOICE DATE	INVOICE #	DUE DATE	DAYS PAST DUE	ORIGINAL AMOUNT	OPEN BALANCE

TOTAL AMOUNT DUE

Aging Summary				
Current	**1 - 30 Days**	**31 - 60 Days**	**61 - 90 Days**	**Over 90 Days**

Terms & Instructions