

# STATEMENT

Statement Date

Statement Number

Account Number

Billing Period

## BILL TO

## ANNUAL ACCOUNT SUMMARY

Previous Balance

Total Payments/Credits

Total New Charges

**Total Amount Due**

Payment Due Date

DATE

DESCRIPTION

AMOUNT

BALANCE

DATE

DESCRIPTION

AMOUNT

BALANCE

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DETACH AND RETURN THIS STUB WITH YOUR PAYMENT

**SENDER:**

Amount Enclosed

Account Number:

Statement Number:

Statement Date:

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**Total Amount Due:**

**Due Date:**

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