

STATEMENT

STATEMENT DATE: _____

CUSTOMER ID	STATEMENT NUMBER	BILLING CYCLE	PAGE

BILL TO

SEND PAYMENT TO

DATE	REFERENCE NO.	DESCRIPTION	AMOUNT (\$)	BALANCE (\$)

PREVIOUS BALANCE	
PAYMENTS / CREDITS	
NEW CHARGES	
TOTAL DUE	

PLEASE DETACH AND RETURN THIS PORTION WITH YOUR PAYMENT

CUSTOMER ID
STATEMENT NUMBER
TOTAL DUE
AMOUNT ENCLOSED
