

STATEMENT OF ACCOUNT

Date:

Statement No:

Customer ID:

BILL TO

REMIT PAYMENT TO

TOTAL INVOICED

TOTAL PAID

AMOUNT OVERDUE

INVOICE DATE	INVOICE NO.	DUE DATE	INVOICE AMOUNT	AMOUNT PAID	BALANCE OUTSTANDING
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Total Outstanding:

Total Overdue:

Amount Due:

PAYMENT TERMS & INSTRUCTIONS

CONTACT INFORMATION