

Vendor Name : abcdcompany
Invoice Type : Quarterly Report
Invoice Term : Due Now
Address : abcd address
novi
City : novi **State** : Michigan **Zip** : 48383

Invoice Number : INV_951620130619052719
Invoice Date : 06/19/2013
Email : abcd@a.com
Phone : (232) 232-2323
Fax :

Line Item#	Client	Year	Quarter	Date	Check#	Amount Due	Amount Paid
1	Sigma Nu	2013-14	Fourth	06/19/2013		\$153.00	\$0.00
Total						\$153.00	\$0.00