

Affinity Consultants  
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#300  
Vista,CA 92081  
accounting@affinity-consultants.com

# INVOICE

Bill To:

Affinity Test Vendor 4  
28 W 27th  
Spokane, Washington 99224

**Greek Organization**

Alpha Delta Pi

**Total**

**Amount**

\$0.00

**\$0.00**

Date: 05/14/2013	Invoice #:
Term: Net 15 days	Due Date: 05/29/2013
Amt Due:	\$0.00
Amt. Enclosed:	