

Vendor Name : Affinity Test Vendor 2
Invoice Type : Quarterly Report
Invoice Term : Due Now
Address : 123 Main Street

City : Chicago **State** : Illinois **Zip** : 92009

Invoice Number : INV_937820130108122418
Invoice Date : 01/08/2013
Email : affinitytestvendor2recovery@gmail.com
Phone : (760) 555-6767 ext. 190
Fax : (760) 555-8888

Line Item#	Client	Year	Quarter	Date	Check#	Amount Due	Amount Paid
1	Alpha Chi Omega	2012-13	Second	01/08/2013		\$0.00	\$0.00
2	Alpha Delta Pi	2012-13	Second	01/08/2013		\$0.00	\$0.00
3	Acacia	2012-13	Second	01/08/2013		\$0.00	\$0.00
4	Acacia	2012-13	Second	01/08/2013		\$0.00	\$0.00
Total						\$0.00	\$0.00