



Monroe County Food Protection
111 Westfall Road, Room 832
Rochester, NY 14620
(585) 753-5064

PAYMENT

Date	Payment #	Pay Method	Check #
4/23/2019	38698	Check	1234

Bill To
123 Fake St Rochester, NY 12345

Invoice For Facility

Paid Date	Description	Amount	Due
Invoice# FWC2019-0001			
4/23/19	Level 1 Food Worker Certification	\$140.00	
4/23/19	Exam Only	\$30.00	
4/23/19	Level 1 Recertification Course	\$100.00	
4/23/19	LATE FEE	\$25.00	
Invoice# FWC2019-0001 Total:		\$295.00	\$0.00
Payment# 38686			
4/23/19	Payment Applied	\$646.00	
4/23/19	Payment Applied	\$465.00	
4/23/19	Over/Under Payment Credit	\$89.00	
Payment# 38686 Total:		\$1,200.00	\$0.00
Invoice# FWC2019-0004			
4/23/19	Level 1 Food Worker Certification	\$140.00	
Invoice# FWC2019-0004 Total:		\$140.00	\$0.00
Invoice# FS2019-2704			
4/23/19	Seating 0-25	\$170.00	
4/23/19		\$50.00	
Invoice# FS2019-2704 Total:		\$220.00	\$0.00
Invoice# FS2019-2705			
4/23/19	Mobile Food Service, Bakery, Caterer or Commissary	\$225.00	
Invoice# FS2019-2705 Total:		\$225.00	\$0.00
Payment# 38698			
4/23/19	Payment Applied	\$791.00	
	Over/Under Payment Credit	\$9.00	\$-9.00
Payment# 38698 Total:		\$800.00	\$-9.00
Payment Amount: \$800.00			
Remaining Customer Balance: \$-9.00			



Monroe County Food Protection
111 Westfall Road, Room 1020
Rochester, NY 14620

INVOICE

Date	Invoice #	Due Date
4/1/2019	FWC2019-0001	4/9/2019

Bill To
123 Fake St Rochester, NY 12345

Paid Date	Description	Quantity	Price	Amount
4/23/19	Level 1 Food Worker Certification		\$140.00	\$140.00
4/23/19	Exam Only		\$30.00	\$30.00
4/23/19	Level 1 Recertification Course		\$100.00	\$100.00
4/23/19	LATE FEE		\$25.00	\$25.00
Total: \$295.00				
Customer Balance: \$-9.00				

Failure to remit payment by the due date will result in a late fee added to your balance due.
Late fees are \$50 if your balance due is \$100 or more; or \$25 if your balance due is under \$100.

TO PROPERLY CREDIT YOUR ACCOUNT, PLEASE SEND IN THIS PAYMENT SLIP WITH YOUR PAYMENT

PAY ONLINE: <https://ehpermits.monroecounty.gov/dev/pay>

Make checks payable to: Monroe County Department of Public Health

Invoice #: FWC2019-0001

Bill To
123 Fake St
Rochester, NY 12345

Monroe County Food Protection
111 Westfall Road, Room 1020
Rochester, NY 14620

Total: \$295.00



Monroe County Food Protection
111 Westfall Road, Room 1020
Rochester, NY 14620

INVOICE

Date	Invoice #	Due Date
4/23/2019	FWC2019-0004	5/1/2019

Bill To
123 Fake St Rochester, NY 12345

Paid Date	Description	Quantity	Price	Amount
4/23/19	Level 1 Food Worker Certification		\$140.00	\$140.00
				Total: \$140.00
				Customer Balance: \$-9.00

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Late fees are \$50 if your balance due is \$100 or more; or \$25 if your balance due is under \$100.

TO PROPERLY CREDIT YOUR ACCOUNT, PLEASE SEND IN THIS PAYMENT SLIP WITH YOUR PAYMENT

PAY ONLINE: <https://ehpermits.monroecounty.gov/dev/pay>

Make checks payable to: Monroe County Department of Public Health

Invoice #: FWC2019-0004

Bill To
123 Fake St
Rochester, NY 12345

Monroe County Food Protection
111 Westfall Road, Room 1020
Rochester, NY 14620

Total: \$140.00



Monroe County Food Protection
111 Westfall Road, Room 832
Rochester, NY 14620
(585) 753-5064

INVOICE

Date	Invoice #	Due Date
4/23/2019	FS2019-2704	4/30/2019

Bill To
123 Fake St Rochester, NY 12345

Invoice For Facility

Paid Date	Description	Amount
4/23/19	Seating 0-25	\$170.00
4/23/19		\$50.00
		Total: \$220.00
		Customer Balance: \$-9.00

Failure to remit payment by the due date will result in a late fee added to your balance due.
Late fees are \$50 if your balance due is \$100 or more; or \$25 if your balance due is under \$100.

TO PROPERLY CREDIT YOUR ACCOUNT, PLEASE SEND IN THIS PAYMENT SLIP WITH YOUR PAYMENT
 PAY ONLINE: <https://ehpermits.monroecounty.gov/dev/pay> QUESTIONS/PAY BY PHONE: (585) 753-5064
 Make checks payable to: Monroe County Department of Public Health

Facility: 123 TEST COMPANY
FAC #:
Invoice #: FS2019-2704

Bill To
123 Fake St
Rochester, NY 12345

Monroe County Food Protection
111 Westfall Road, Room 832
Rochester, NY 14620

Total: \$220.00



Monroe County Food Protection
111 Westfall Road, Room 832
Rochester, NY 14620
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INVOICE

Date	Invoice #	Due Date
4/23/2019	FS2019-2705	5/31/2019

Bill To
123 Fake St Rochester, NY 12345

Invoice For Facility

Paid Date	Description	Amount
4/23/19	Mobile Food Service, Bakery, Caterer or Commissary	\$225.00
		Total: \$225.00
		Customer Balance: \$-9.00

Failure to remit payment by the due date will result in a late fee added to your balance due.
Late fees are \$50 if your balance due is \$100 or more; or \$25 if your balance due is under \$100.

TO PROPERLY CREDIT YOUR ACCOUNT, PLEASE SEND IN THIS PAYMENT SLIP WITH YOUR PAYMENT
PAY ONLINE: <https://ehpermits.monroecounty.gov/dev/pay> QUESTIONS/PAY BY PHONE: (585) 753-5064
Make checks payable to: Monroe County Department of Public Health

Facility: 123 TEST COMPANY
FAC #:
Invoice #: FS2019-2705

Bill To
123 Fake St
Rochester, NY 12345

Monroe County Food Protection
111 Westfall Road, Room 832
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Total: \$225.00