|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| BILL TO |  |  |  |  | DATE | |
| ATTN: Name / Dept: | |  |  |  |  | |
| Company Name: | |  |  |  | STATEMENT NO. | |
| Address 1 : | |  |  |  |  | |
| Address 2 : | |  |  |  | CUSTOMER ID | |
| Telephone : | |  |  |  |  | |
| Email Address : | |  |  |  |  |  |
|  |  |  |  |  |  |  |
| REMIT TO | |  |  |  | **BALANCE DUE** |  |
| Company Name | |  | *.* |  |
| Address Line 1 | |  |  | **DATE PYMNT DUE** |  |
| Address Line 2 | |  |  |
| Hamilton, OH 44416 | |  |  | **AMT ENCLOSED** | - |
| *Please make check payable to* Your Company Name. | | |  |
|  |  |  |  |  |  |  |
| ACCOUNT ACTIVITY | |  |  |  |  |  |
| DATE | TYPE | INVOICE | DESCRIPTION | PAYMENT | AMOUNT | BALANCE |
|  | B A L A N C E F O R W A R D | | | | |  |
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|  | | | | CURRENT BALANCE | |  |