



Invoice

From:

AFP, Cincinnati Chapter

PO Box 31206

Cincinnati, OH 45231

Phone (513) 939-2652

Fax (513) 939-2653

Email: admin@afpcincinnati.org

Invoice Number	INV-0458
Order Number	15323
Invoice Date	March 18, 2024
Total Due	\$0.00

Terms: Due Upon Receipt

Job Title	Company Name
Part Time Gift Entry and Data Specialist	Springer School and Center

Hrs/Qty	Service	Rate/Price	Sub Total
1	Member Listing	\$200.00	\$200.00

Payment Information:

Check

Please make check payable to:

AFP, Greater Cincinnati Chapter
PO Box 31206
Cincinnati, Ohio 45231

Payment Amount: _____

Check Number: _____

Please return invoice with payment