

From:

AFP, Cincinnati Chapter

PO Box 31206 Cincinnati, OH 45231 Phone (513) 939-2652 Fax (513) 939-2653

Email: admin@afpcincinnati.org

Total Due	\$0.00
Invoice Date	June 14, 2024
Order Number	15720
Invoice Number	INV-0478

Terms: Due Upon Receipt

Job Title	Company Name
Vice President, Development	Gilman Partners (On Behalf of Dan Beard Council)

Hrs/Qty	Service	Rate/Price	Sub Total
1	Non-Member Job Listing	\$250.00	\$250.00

Payment Information:

Check	Credit Card		
Please make check payable to:	Credit Card Payment Information		
AFP, Greater Cincinnati Chapter	☐ Visa ☐ MasterCard ☐ Am		
PO Box 31206 Cincinnati, Ohio 45231	Name on the card:		
	Company Name:		
Payment Amount:	Billing Address:		
Check Number:	City, ST, Zip:		
	Phone #:		
Please return invoice with payment	Email Address:		
	Credit Card Number:		

Credit Card			
Credit Card Payment Information			
□ Visa □	MasterCard	☐ American Express	
Name on the card:			
Company Name:			
Billing Address:			
City, ST, Zip:			
Phone #:			
Email Address:			
Credit Card Number:			
Expiration Date:			
CSV Code:			
Signature:			