



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-0564
Order Number	17745
Invoice Date	November 23, 2025
Total Due	\$0.02

Terms: Due Upon Receipt

Job Title	Company Name
Final Test with invoice	IS

Hrs/Qty	Service	Rate/Price	Sub Total
1	Member Listing Test	\$0.02	\$0.02

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