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-0610
Order Number	18591
Invoice Date	July 16, 2026
Total Due	**$0.00**

Terms: Due Upon Receipt

Job Title	Company Name
Advancement Director	Cincinnati Youth Collaborative

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

Paid