

# Invoice



**From:**

AFP, Cincinnati Chapter  
PO Box 31206  
Cincinnati, OH 45231  
Phone (513) 939-2652  
Fax (513) 939-2653  
Email: [admin@afpcincinnati.org](mailto:admin@afpcincinnati.org)

|                  |                 |
|------------------|-----------------|
| Invoice Number   | INV-0059        |
| Order Number     | 5119            |
| Invoice Date     | April 13, 2018  |
| <b>Total Due</b> | <b>\$250.00</b> |

Terms: Due Upon Receipt

| Job Title | Company Name |
|-----------|--------------|
|           |              |

| Hrs/Qty | Service                                | Rate/Price | Sub Total |
|---------|--|------------|-----------|
| 1       | <a href="#">Non-Member Job Listing</a> | \$250.00   | \$250.00  |

## 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*