Company Name

ITEMIZED INVOICE

Bill To: **[Customer Name]**
[Street Address]
[City, ST ZIP]
[Phone]

Statement Date	4/30/12
Statement #	[100]
Customer ID	[ABC123]

Remittance

To ensure proper credit, please enclose a copy of this statement with your check and remit to:

    [Company Name]
    [Street Address]
    [City, ST Zip]
Please write your Customer ID on your check.

Account Summary

Balance Due	$0.00
Payment Due Date	
Amount Enclosed $	

Make all checks payable to
[Company Name]

Account Activity

DATE	TYPE	INVOICE	DESCRIPTION	PAYMENT	AMOUNT	BALANCE
					Current Balance:	$0.00

If you have any questions about this invoice, please contact
[Name], [Street Address], [City, ST Zip]
Phone [000-000-0000], Fax [000-000-0000], [Email]

Thank You For Your Business!