

Your company name
Your street address
City, Province, Postal code
(123)456-7890
youemail@domain.com

Statement

Date:
Statement #
Customer ID:

BILL TO:

Client Company/ Name
Street Address
City, Postal Code
Phone Number
Email

ACCOUNT SUMMARY

Previous Balance	\$
Credits	\$
New Charges	\$
Total Balance Due	\$
Payment Due Date	<input type="text"/>

DATE	INVOICE #	DESCRIPTION	CHARGES	CREDITS	ACCOUNT BALANCE
			0	0	0
			0	0	0
			0	0	0
			0	0	0
			0	0	0
			0	0	0
ACCOUNT CURRENT BALANCE					\$

MESSAGE

Your account balance is _____. Please make payment of the total balance by the stated due date. Make all checks payable to Company Name.

Thank you for your business

This statement is brought to you by

