

**YOUR COMPANY NAME**

Address (first line)

Address (second line)

City, State or Province, Postal Code

Phone Number

Fax Number

<b>PURCHASES</b>		
REFERENCE	DATE	INVOICE NO.

<b>CREDITS</b>		
REFERENCE	DATE	CHECK NUMBER

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# STATEMENT

<i>Date</i>
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*Company Name*  
*Address (first line)*  
*Address (second line)*  
*City, State or Province, Postal Code*

DESCRIPTION	AMOUNT
<i>Total purchases:</i>	

DESCRIPTION	AMOUNT

<i>Total credits:</i>	
<b>Please pay this amount:</b>	<b>#VALUE!</b>

*When sending payment, include the invoice number on the check. Thank you.*