STATEMENT

STATEMENT DATE:
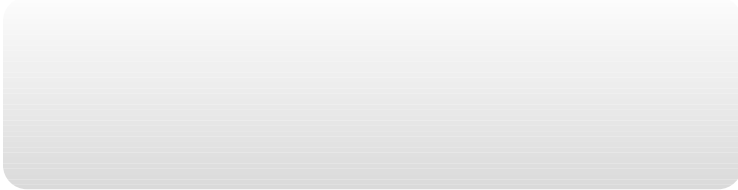
ACCOUNT NUMBER:

PAGE:

AMOUNT REMITTED

$ _____

RETURN THIS PORTION OF STATEMENT WITH YOUR PAYMENT.

INVOICE	DATE	TERMS OF REF.	CODE	DEBITS	CREDITS	BALANCE