

# MEMBERSHIP DUES INVOICE

## FROM

COMPANY: \_\_\_\_\_  
 ATTN: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE: \_\_\_\_\_  
 ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_  
 E-MAIL: \_\_\_\_\_

## DETAILS

DATE: \_\_\_\_\_  
 INVOICE NO. \_\_\_\_\_  
 TERMS: \_\_\_\_\_

## BILL TO

COMPANY: \_\_\_\_\_  
 ATTN: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE: \_\_\_\_\_  
 ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_  
 E-MAIL: \_\_\_\_\_

## MEMBERSHIP PLANS

TIER 1: \_\_\_\_\_ @ \$ \_\_\_\_\_  
 TIER 2: \_\_\_\_\_ @ \$ \_\_\_\_\_  
 TIER 3: \_\_\_\_\_ @ \$ \_\_\_\_\_  
 TIER 4: \_\_\_\_\_ @ \$ \_\_\_\_\_

DESCRIPTION	PLAN LENGTH	\$ / MONTH	AMOUNT (\$)
		<b>SUBTOTAL</b>	
		<b>DISCOUNT</b>	
		<b>TAX / VAT</b>	
		<b>TOTAL</b>	

NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

THANK YOU FOR YOUR BUSINESS

