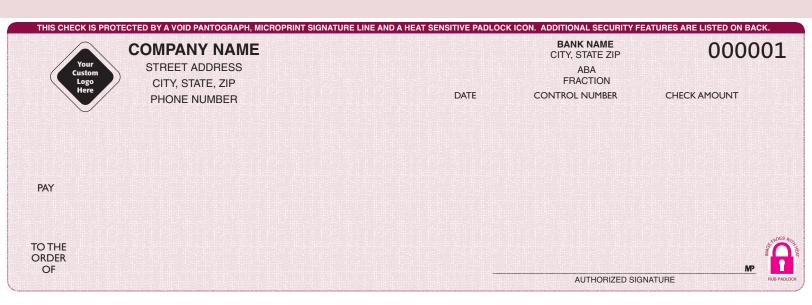
COMPANY NAME CITY, STATE, ZIP CODE 000						
OUR REF. NUMBER	YOUR INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN	NET CHECK AMOUNT



COMPANY NAME CITY, STATE, ZIP

000001