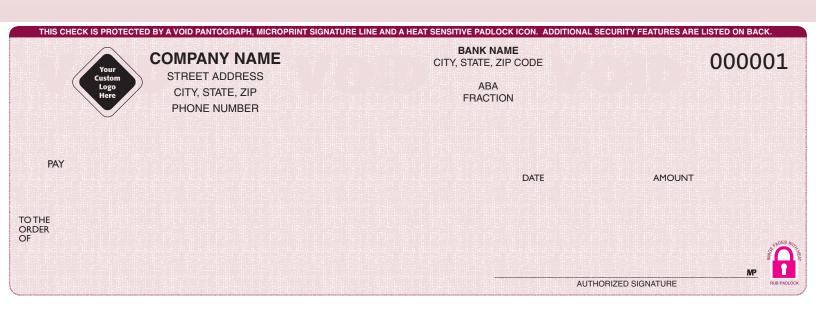
VENDOR ID NUMBER DATE

PAYEE

INVOICE NUMBER INVOICE DATE INVOICE AMOUNT PREVIOUS PAY/CREDIT DISCOUNT TAKEN AMOUNT OF PAYMENT

MEMO

TOTAL



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COMPANY NAME CITY, STATE, ZIP CODE

VENDOR ID

NUMBER

NUMBER

DATE

PAYEE

MEMO

INVOICE NUMBER

INVOICE DATE

INVOICE AMOUNT PREVIOUS PAY/CREDIT DISCOUNT TAKEN AMOUNT OF PAYMENT

TOTAL