STATEMENT OF ACCOUNT

STATEMENT DATE	ACCOUNT NO.

DATE PAID _____ CHEQUE NO. _____ AMOUNT _____

TRANSACTION DATE	INVOICE NO.	DESCRIPTION	AMOUNT	BALANCE
AGE				TOTAL
AMOUNT				

PLEASE RETURN THIS PORTION WITH YOUR PAYMENT

STATEMENT DATE	ACCOUNT NO.

AMOUNT REMITTED _____

IF PAYING BY INVOICE - PLEASE CHECK INDIVIDUAL INVOICES PAID

INVOICE NO.	AMOUNT DUE	√
BALANCE DUE	TOTAL	

MADE IN CANADA

OE 20-11

Proof Proof Proof