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| **VACVB** |
| PO Box 3363 |
| Warrenton, VA 20188(P) (540) 904-4710(F) (202) 962-3939vacvb@colliegorg.com |

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| dATE | iNVOICE # |
| 5/4/2014 | 2014 - 101 |

Invoice |

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| **Contact Information** |  |
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| Number of Submissions | DESCRIPTION | AMOUNT |
|  | 2014 Virgo Nominations –  |  |
|  | One - $35 | $ |
|  | Two - $70 | $ |
|  | Three - $105 | $ |
|  | Four - $130 | $ |
|  |  |  |
|  |  |  |
| **Thank you for your continued support of VACVB! TOTAL** | $ |

**Payment**

Credit Card: VISA \_\_\_\_ MasterCard \_\_\_\_ AMEX \_\_\_\_

Name on Credit Card \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Credit Card # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3 or 4 Digit CVV Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Authorized $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Checks should be made payable to VACVB (Federal ID #54-1788339) and sent to:

PO Box 3363, Warrenton, VA 20188