

Invoice

Use this form to send an invoice requesting payment from the New Jersey Federation of Camera Clubs.

Email to njfcctreasurer@gmail.com

- or -

mail a copy to Virginia Kolstad, Treasurer NJFCC, 233 Cherokee Road, Lafayette, NJ 07848

You may type or print **legibly** by hand to complete the form. Attach additional documents if necessary.

| |
|---------------|
| Invoice date: |
|---------------|

| Person submitting request for payment | |
|---------------------------------------|---------------|
| Name: | Organization: |
| Email address: | Phone number: |
| Postal address: | |
| | |

| Itemized List for which payment is requested | |
|---|--------|
| Item Description(s) – attach additional detail if necessary | Amount |
| | |
| Total amount requested: | |
| | |

| Send payment to | |
|----------------------|--|
| Name: | |
| Phone number: | |
| Organization: | |
| Postal address: | |
| | |
| Reference number: | |