INVOICE _____

DATE: _____

To:	**Owning Agency:**			
INVITATION NO:	**CONTRACT NO:**	**APP FUND SYMBOL:**	**STA DEP SYM:**	**TERMS:**
_____ Contracting Officer				

ITEM	DESCRIPTION	QTY	UNIT	AVERAGE PRICE	AMOUNT

Make all checks payable to: General Services Administration

If you have any questions, please call _____ **TOTAL DUE:** _____

FOR COLLECTION OFFICER USE ONLY:

PAID: Check Number: _____ $ _____

_____ _____

COLLECTION OFFICER DATE

_____

_____

_____

COLLECTION OFFICER ADDRESS

THANK YOU FOR YOUR BUSINESS!