|  |  |
| --- | --- |
| **Remit To:**  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | INVOICE Invoice #:\_\_\_\_\_\_\_\_\_\_\_\_Invoice Date:\_\_\_\_\_\_\_\_\_\_\_\_ |
| For: SUNY Cortland  PO Box 2000  Cortland, NY 13045 |  |

|  |  |  |  |
| --- | --- | --- | --- |
| QUANTITY | DESCRIPTION | UNIT PRICE | TOTAL |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
|  | SUBTOTAL |  |
|  | **TOTAL due** |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature