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| **Remit To:**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | INVOICEInvoice #:\_\_\_\_\_\_\_\_\_\_\_\_ Invoice Date:\_\_\_\_\_\_\_\_\_\_\_\_  |
| For:SUNY CortlandPO Box 2000Cortland, NY 13045 |  |

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| QUANTITY | DESCRIPTION | UNIT PRICE | TOTAL |
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|  | **TOTAL due** |  |

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Signature