



AACCA

Alabama Association of Child Care Agencies

MAIL WITH YOUR PAYMENT TO:
AACCA Treasurer
c/o AGAPE of North Alabama, Inc.
P.O. Box 127
Madison, AL 35758

Phone: 256-859-4481
Fax: 256-859-4483
danny@agapecares.org

Invoice

Agency Name: _____

Contact Person: _____

Mailing Address: _____

E-Mail Address: _____

Direct Phone Number: _____

<i>Quantity</i>	<i>Description</i>				<i>Dues</i>	
	<i>Item</i>	<i>Due Date</i>	<i>Amount</i>	<i>Status</i>	<i>Total Due</i>	
1	2018 AACCA Dues	01-01-2018	300.00	Current	300.00	
Tax Payer Identification # 63-0767824					<i>Balance Due Upon Receipt</i>	\$300.00

Official Use Only:

Date Received: _____

Amount Received: _____

Check Number: _____