

2222 Industrial Drive | Wadena, MN 56482

Invoice Notice Form

Please submit form and back-up information to the Business Office for Billing

Invoice Date

Bill to:

Organization / Company Name

Department Providing Product/Service					Contact Person					
Department Signature					Address					
					City, Sta	ite, Zip				
					Telepho	ne Num	ber			
Quantity Descripti				on			Unit	Price	Total Price	
						Balance Due				
	[FD	ORG	PRO	CRS	FIN	OBJ		