SOAR
Southern Ohio Association of Realtors®

# Invoice

Name:_____ Company:_____

Home Address:_____

City: _____ State:_____ Zip:_____ E-Mail:_____

Phone:_____ Fax:_____

| DATE | TYPE | INVOICE # | DESCRIPTION | AMOUNT | PAYMENT | BALANCE |
|---|---|---|---|---|---|---|
| | | | | | | |
| **06/06** | | | **Annual Membership Dues** | **$115.00** | | **$115.00** |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | **Total** | **$115.00** |

*Southern Ohio Association of Realtors*
*3848 McMann Road*
*Cincinnati, Ohio 45245*
*513 528-2657*