**Iowa Association of Agricultural Educators**

**Attn: Barbara A. Lemmer, Exec. Assistant**

**P.O. Box 5**

**Troy Mills, IA 52344**

**Customer: Your School Name**

 **Your School Address**

**INVOICE: 2010-2011 (School Name)**

**May 1, 2010**

|  |  |  |
| --- | --- | --- |
| **Transaction Description** | **Amount** | **Total Amount** |
| Summer Conference Registration | 1 @ $175.00 or $225.00 |  $ 175.00/225.00 |
| Instructional Packet | 1 @ 125.00 or 150.00 | $ 125.00/150.00 |
| Extra Meals |  |  |
| IAAE Membership Dues | 1 @ $165.00 | $ 165.00 |
|  **Total Cost**  | **xxxxxxxxxxxx** | **$ 000.00** |

**Your prompt attention to this invoice would be greatly appreciated. Please submit payment to the address shown at the top of this invoice with your registration form. Registration form enclosed for your convenience.**

**Thank you,**

**Barbara A. Lemmer, Executive Assistant**

**Iowa Association of Agricultural Educators**