

**Indiana Association of  
School Broadcasters**

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## INVOICE

**BILL TO**

IASB Member  
School \_\_\_\_\_  
Advisor \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_

**INVOICE #** 1001  
**DATE** 02/22/2017  
**DUE DATE** 03/08/2017

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ACTIVITY	QTY	RATE	AMOUNT
Spring Conference Student Admission	___	12.00	___

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BALANCE DUE

\$ \_\_.00