



Invoice Nbr : [REDACTED]
Location of Sale : [REDACTED]
Sales Person Name : [REDACTED]
Sales Person Nbr : [REDACTED]
PO Number : [REDACTED]
Date : 08/09/2018
Time : 9:17:08 AM

	Qty	Part Number/Desc	Age	Rate	Price	Amount
	6	PE-GC2			80.91	485.46
		Sales Total				
Received	6	LTCORE				
		Sub Total				
		Invoice Total				
		Invoice Payment Amount				
nt Apply To 20064052		CHECK		13.54		485.46
		Net Invoice				\$ 0.00
***** DEALER AGING *****						
Aging - Current Balance					Total	00