

115 W 55th St. Suite 301
 Clarendon Hills, IL 60514
 Phone: 844-899-8092 Fax: 888-908-8002

Invoice #: _____

Date: _____

INVOICE

Bill To:

PO:

Qty.	Description	Rate	Amount
	<p style="text-align: center;"><u>PLEASE NOTE</u></p> <p>The right to payment under this invoice has been assigned to Compass Funding Solutions LLC (CFS) and all payments hereunder are to be directed to the assignee at the address noted below.</p> <p>Remittances to other than CFS do not constitute payment of this Invoice. CFS must be given notification of any claims, agreements or merchandise returns which would affect the payment of all or part of this Invoice on the due date.</p> <p>COMPASS FUNDING SOLUTIONS LLC P.O. BOX 205154 DALLAS, TX 75320-5154 844-899-8092</p>		
		TOTAL	

Print Invoice