

October 2, 2024

Enid High School

Chapter Fee $50

Each student $7.00

School Name:

Advisor Name:

School Address:

City, State, Zip:

BILLED TO:

Oklahoma North 2 FCCLA District Leadership Meeting

INVOICE

|  |  |  |  |
| --- | --- | --- | --- |
| Description (Student Name) | Unit | Price | Amount Due |
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|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total |  |  |  |

Please Make

Payments to

Rita Hartwick

c/o of Enid High School

611 West Wabash

Enid, OK 73703