# Advertising Statement

P.O. Box 763 Trinidad, CO 81082

**TAMMY TORRES** 

**GOVERNMENTS** 300 S. BONAVENTURE

TRINIDAD, CO 81082

**BILLED ACCOUNT** 

SOUTH CENTRAL COUNCIL OF

BILLING DATE	TERMS OF PAYMENT
09/30/2022	Standard Terms

BILLED ACCOUNT NO.	AGENCY/CLIENT		
12112325	12112325		
NAME OF AGENCY/CLIENT			

# SOUTH CENTRAL COUNCIL OF GOVERNMENTS

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DATE	TRANS#	DESCRIPTION	INS	SAU	INCHES	COST	EXTRAS	TOTAL
08/31/2022		Balance Forward						9.80
09/02/2022	400326383	Payment Check 132880					-9.80	-9.80
09/12/2022	300401885	8-22-22 3X8 ADV					169.00	169.00

0 0	AGING			
0 - 0	1 - 30	31 - 60	61 - 90	91 - 120
\$ 169.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

TOTAL NET AMOUNT DUE	
\$ 169.00	

## PLEASE RETURN THIS PORTION WITH YOUR REMITTANCE

If you desire to charge this amount to your credit card, please complete the folloand return to the address below: [] Visa [] Mastercard [] Discover	wing information
Acct#	Exp Date:
Signature	

Thank you for your business.

### BILLED ACCOUNT NO. **BILLED ACCOUNT NAME** AMOUNT REMITTED 12112325 SOUTH CENTRAL COUNCIL OF

### **REMIT TO**

Chronicle-News P.O. Box 763 Trinidad, CO 81082

Phone: 719-846-3311 Fax: 719-846-3612

Payment in full is due upon receipt of the statement. A service charge on all balances over 30 days will be computed by a 'Periodic Rate' of 1-1/2% per month, which is an ANNUAL PERCENTAGE RATE OF 18%, this applies to the previous balance after deducting current payments and credits appearing on your statement.

Remittance Advice