**Invoice Date**

**Invoice #**

**INVOICE**

*1/*2*5/*2015

**Indian Village Community Association, Inc.** 2214 Wawonaissa Trail Fort Wayne, IN 46809

Neighborhood Beautification

NBC donation: $ (add amount to your balance due)

**Property Address:**

**Meda Pass**

Bill to:

*PLEASE PAY THIS AMOUNT*

$5.00 Make checks payable to: IVCA

Meda Pass Fort Wayne, IN 46809

**Due on receipt**

E-mail:

**Please check box to be included in the resident directory.**

Phone:

Please check box if ad**dress is INCORRECT or has** CHANGED, and indicate change(s) on reverse side.

**PLEASE DET*A*CH AND RETURN THIS PORTION WITH PAYMENT**

**Terms**

**Indian Village Community Association, Inc. 2214 Wawonaissa Trail** Fort Wayne, IN 46809

**Property Address:**

Med**a Pass**

Due on receipt

**Quantity**

Description

**Rate**

**Amount**

1|2015 Regular Member Maintenance Fee

5.00

5.00

***We appreciate your prompt payment.***

**Total Due:**

$5.00

$5 Quarterly Late Fee on all unpaid balances. **$30 CHARGE FOR RETURNED CHECK**

**Billing Inquiries? Call Sarah Didier at: 260-7*47-*7*1*41**

http*:/*/www.indianvillagefw.com