

# INVOICE

**Remittance Address:**

CH Diagnostic & Consulting Service, Inc.  
512 5th Street  
Berthoud, CO 80513  
970-532-2078

Invoice Number 20090117

Invoice Date 2/3/2009

PO Number

Contract Number

RECEIVED

FEB 20 2009

**Customer:** 20011350

Meadow Mountain Water

Attn: Accounts Payable

PO Box 162

Allenspark, CO 80510

**Please include Invoice number with payment.**

**Invoice Due Date: March 15, 2009**

Description of Services	Quantity	Unit Price	Discount	Amount
E. coli Analysis	1	\$35.00	0.00%	\$35.00

*We appreciate your business!*

**Invoice Total** **\$35.00**