# INVOICE

VCOMA Affiliate Membership

| Quantity | Description | Unit Price | Amount |
|---|---|---|---|
| 1 | Affiliate Corporate Membership | 500.00 | 500.00 |
| | | | 0.00 |
| | | | 0.00 |
| | | | 0.00 |
| | | | 0.00 |
| | | | 0.00 |
| | | | 0.00 |
| | | **Subtotal** | 500.00 |
| | | **Sales Tax** | 0.00 |
| | | **Shipping & Handling** | 0.00 |
| | | **Total Due** | 500.00 |

Make all checks payable to:

**VCOMA**

Please print this invoice and send it with a company check to the address below. Affiliate Membership is not final until payment is received and cleared.

50 Woodside Plaza Suite 406 • Redwood City, CA 94061 • Phone: 650-575-1160 •
www.vcoma.com