



Invoice date: 10/1/2020
Due: Wed, **Oct 20**, 2020
Total: **\$XXX.XX**
Invoice# xxxx Customer# xxxx
E-Rate Funding Year: FY2020
E-Rate FRN: xxxxxxxxxx

Your Company
Your Street
Your City,State xxxxx

Remit To:
EM3 Networks, LLC
810 Pennsylvania
Suite 205
Lawrence, KS 66044
843-410-2008

PLEASE VISIT <https://em3.billcenter.net> to view your monthly invoice and payment history. You can also make online payments by ACH or Credit Card as well. *****PLEASE CONTACT us at billing@em3networks.com or call us at 843-410-2008.

To avoid any service interruption, please pay your invoice by the PAYMENT DUE DATE. **There will be a X% late fee assessed on your account if not paid by the DUE DATE of each month. **There will be a xx% credit card processing fee on all credit card payments. **\$xx returned check fee plus xx% of the invoiced amount. **

Summary

Balance Information	
Previous Balance	xxxx.xx
Payments Received - Thank you!	(xxxx.xx)
Balance Forward	0.00
New Charges	
Recurring Charges	xxxx.xx
Taxes and Surcharges	xxx.xx
Total New Charges	xxxx.xx
E-Rate xx% Discount	(xxxx.xx)
Total Amount Due	xxx.xx
E-Rate Credit Balance Forward \$0.00	

Payments

Description	Date	Amount
E-Rate Reimbursement Received	09/10/20	(xxxx.xx)
Payment Received, Thank you!	09/20/20	(xxx.xx)
Subtotal		(\$xxxx.xx)

Management Reports

Master Account Summary

Acct	Name	MRC	NRC	Usage	Credit	Taxes and Surcharges	Total
xxxx	Your Company						
xxxx	xxxxxx	xxxx.xx				xx.xx	xxxx.xx
xxxx	xxxxxxx	xxx.xx				xxx.xx	xxx.xx
		xxxx.xx	0.00	0.00	0.00	xxx.xx	xxxx.xx

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Account: **XXXXXXXXXX**

Customer **xxxx**

Invoice ID: **xxxx**

Your address

Your City, State xxxx -xxxx

Recurring Charges

Internet: Circuit ID: **XXXXXX**

Description	Start	End	Rate	Qty	Amount
Managed Internet Service Port 100Mbps	10/01/20	10/31/20	xxx.xx	1	xxx.xx
Switched Ethernet Access 100Mbps	10/01/20	10/31/20	xxx.xx	1	xxx.xx
Subtotal					\$xxx.xx

Taxes and Surcharges

Regulatory Recovery Fee	xx.xx
Subtotal	\$xx.xx

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Account: **Your Company**

Customer**xxxx**

Invoice ID: **xxxx**

Your Address

Your City, State xxxxx

Recurring Charges

Internet: Circuit ID: **XXXXXX**

Description	Start	End	Rate	Qty	Amount
Managed Internet Service Port 100Mbps	10/01/20	10/31/20	xxx.xx	1	xxx.xx
Switched Ethernet Access 100Mbps	10/01/20	10/31/20	xxx.xx	1	xxx.xx
Subtotal					\$xxx.xx

Taxes and Surcharges

Carrier Cost Recovery Fee	xx.xx
Regulatory Recovery Fee	xx.xx
Subtotal	\$xxx.xx