



Northern New Jersey Youth Wrestling- Silver Division

**INVOICE**

**Customer**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Phone \_\_\_\_\_

**Misc**

Date 9/30/2015  
 Order No. \_\_\_\_\_  
 Rep \_\_\_\_\_  
 FOB \_\_\_\_\_

Qty	Description	Unit Price	TOTAL
1	League dues for participation in the Northern New Jersey Youth Wrestling League. <b>Please note: payment must be submitted in full by December 1st in order to participate in the league.</b>	\$ 425.00	\$ 425.00
	Make checks payable to: <b>North Jersey Midget Wrestling</b> Mail Payment to: Glenn Garofano 38 Fox Hill Drive Franklin NJ 07416		

SubTotal	\$ 425.00
Shipping	
<b>TOTAL</b>	<b>\$ 425.00</b>

**Payment** Select One...

Comments \_\_\_\_\_  
 Name \_\_\_\_\_  
 CC # \_\_\_\_\_  
 Expires \_\_\_\_\_

Tax Rate(s)

Office Use Only

*Any Questions?  
 Please Contact Glenn Garofano @ 973-219-1319*