

INVOICE



California Latino School Boards Association

CLSBA
PO BOX 33076
RIVERSIDE, CA 92519

BILL TO:

DATE: _____

DESCRIPTION	QTY	PRICE	TOTAL
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CLSBA Annual Membership

TOTAL AMOUNT:

AMOUNT DUE:

Thank you for your support!

Please Mail Checks to:
CLSBA
PO Box 33076
Riverside, CA 92519