

Membership Fee Invoice

For Nonprofit Organizations

Invoice To:
[Member Name]
[Member Address Line 1]
[Member Address Line 2]
Invoice #:
[0001]

Date Issued:
[YYYY-MM-DD]

Membership Period:
[Start Date] – [End Date]

Description	Amount
[Annual Membership Fee]	[\$Amount]
[Additional Donation or Optional Fees]	[\$Amount]
Total Due	[\$Total Amount]

Payment Instructions:
Please make checks payable to [Nonprofit Organization Name] and mail to [Organization Address].
Or pay via [Bank Details / Online Payment Link].

Contact:
[Contact Name], [Title]
[Email Address] | [Phone Number]

Authorized Signature