

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