**Billing Statement Form Word**

**Company Name
Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Statement Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Billing Period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Due Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Bill To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Customer ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Account Summary
Total Due: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Previous Balance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Payments Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Current Balance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Transaction Details**

| **Date** | **Description** | **Amount Paid** | **Balance Due** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Please make payment to:
Bank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
Routing Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**