

HERITAGE SOCIETY

[Organization Address Line 1]
[City, State, Zip Code]
[Tax ID / EIN]

INVOICE

Date: _____
Invoice #: _____

MEMBER INFORMATION

[Member Name]
[Address]
[City, State, Zip]
[Email]

MEMBERSHIP DETAILS

Member ID: _____
Tier: _____
Period: _____

Description	Amount
Annual Membership Contribution - [Tier Name]	\$ 0.00
Additional Heritage Fund Donation	\$ 0.00
Processing/Administrative Fee	\$ 0.00

Total Due: \$ 0.00

PAYMENT INSTRUCTIONS

Please make checks payable to "**Heritage Society**". For bank transfers, use Reference: [Invoice Number]. Contributions to the Heritage Society are tax-deductible to the extent allowed by law.

Thank you for your commitment to preserving our shared history.

www.heritagesociety.org | contact@heritagesociety.org