



CITY OF CHICAGO - FIRE DEPARTMENT

POS INVOICE

Customer

Name
Address
Address

Date

Quantity	Description	Cost	AMOUNT
	059 - Fire Safety Director Certification F YbYk U''		
	see attached for name listing		
		TOTAL	

Remit to: City of Chicago
 Pay at any Chicago payment center
 See locations at <http://www.cityofchicago.org/finance>

Note: Cashiers capture Customer Name.

Point of Sale (POS)
