



CITY OF CHICAGO - FIRE DEPARTMENT

POS INVOICE

Customer

Name _____

Address _____

Address _____

Date

	Description		AMOUNT
	059 - Hotel Desk Clerk Cert New		
	1 Renewal @ \$40		
		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)