

DCP - Capital Area Food Bank 4900 Puerto Rico Ave. NE Washington, DC 20017 Tel: (202) 644-9845 / 9858 Email:

Fax: (202) 529-1767

Agency No:	9728-02 Phone#: (202)489-3289				Invo	ice No:	MF462987		
	Membership Fee				Inta	ake Clerk:	mschulz		
	Bethel Stand for Life Outreach Ministr	ies				er Date:	01/23/2017		
	4814 St. Barnabas Road				Picku	p Date:	01/23/2017		
	Temple Hills MD 20748					p Time:	5:59 pm		
				SI	hip Via:	**NONE	**		
Product				W e i	g h t	Shared M	laintenance	C o s	s t
Reference	Description	Storage	Quantity	Unit	Total	/Lb	Total	Unit	Total
	Invoice Totals:								
		MEMBERSHIP FEE	: \$5	0.00					
	то	TAL CHARGES:	\$5	0.00					
		Amount Owed:	\$5	0.00	Cash	Cash & Carry: Payment is due at time of delivery/picku			ry/pickup.
Available Gra	ants as of 2/2/2017								
<u>GrantRef</u>	GrantName			Baland	ce				
Agency Repre	sentative:		Date:						
Co-Signature:									
Invoice Measu									

Invoice Message: