## Payment of $\$ 0.00$ is due

PAY NOW

## Click here to download a PDF of your invoice

Teaching for an organization?
Forward this email to your organizations billing contact for credit card or check payment. Checks must have the invoice number or payment will not be applied correctly.

Invoice summary


The customer listed on the invoice is responsibile for ensuring payment is remitted and will receive reminder emails for past-due invoices.

## Shipping and Billing Information

Billing address
Kevin Pitts
4747 East Elliot Road 29467
Phoenix AZ 85044
United States

## Your invoice was updated



03/04/24-03/06/24 (9-5 CENTRAL TIME) Virtual
Public Adult Instructor Training - ID $3652538 \times 1$
\$2,200.00
New Instructor Candidate Tuition - Virtual Adult
Adult MHFA Instructor Candidate Training Materials
Version $4.0 \times 1$

Discount - \$200 MEMBER DISCOUNT
Subtotal
Shipping \$0.00
Taxes

You saved \$200.00

## Customer information

Shipping address
Julie Ewald
11807 N Winchester Dr
Fountain Hills AZ 85268
United States
Shipping method
FedEx Ground

Billing address
Steven Bjornstad
15937 West Jenan Drive
Surprise AZ 85379
United States
Payment method

[^0]
## Mental Health <br> FIRST AID

from NATIONAL COUNCIL FOR MENTAL WELLBEING

## SHIPPING ADDRESS

Teresa Haire
2230 W. Calle Marita
Phoenix AZ 85085
United States
\& 6026633333
$\square$ teresalynn0928@gmail.com

INVOICE

## BILLING ADDRESS

Steve Bjornstad
15937 W Jenan Drive
Surprise AZ 85379
United States
$\square$ teresalynn0928@gmail.com

INVOICE NO.
MHFA102964

INVOICE DATE
04/30/202412:47 PM

| LINE ITEM |  | QTY | UNIT PRICE | TOTAL |
| :---: | :---: | :---: | :---: | :---: |
| : $=\square$ | MHFA Action Plan Wallet Card | 50 | \$3.95 | \$168.00 |
| = |  |  | \$3.36 |  |

DISCOUNT :

TAX :
\$16.34
$\$ 22.02$
S110.

Mental Health First Aid Logo Sticker (15-pack)

## REMITTANCE METHOD

authorize_net
(************ 3015)

## INVOICE NOTE

Locksmith: :27c7589dc704
Accept terms and conditions : Tue Apr 30 202409:44:17 GMT-0700 (Mountain Standard Time)
Accetterms andconditions:Tue Apr30202409:44:17 GMT-0700(Mountain Standardime)

TOTAL: $\$ 206.36$

PAID $\quad \$ 206.36$ AMOUNT DUE

Client listed on invoice is responsible for ensuring payment is remitted. Failure to pay will result in your MHFA Connect account being deactivated.

Mail Checks To:
National Council for Mental Wellbeing
P.O. Box 745709

Atlanta, GA 30374-5709


[^0]:    If you have any questions contact us via the Request Assistance Form.

