

Please Include with your payment		No.1
Students Name: Parents/Guardian Name: Email Address: Phone Number:		Mail to: Kelli Gibbons 37 Paige Place Bloomington, IL. 61704
Date DUE	Description	Amount
04/15/2008	Fiesta Bowl 2008 trip payment	
	Make your check payable to "NCHS Bands"	\$143.00
	Total	\$143.00

Please Include with your payment		No.2
Students Name: Parents/Guardian Name: Email Address: Phone Number:		Mail to: Kelli Gibbons 37 Paige Place Bloomington, IL. 61704
Date	Description	Amount
05/15/2008	Fiesta Bowl 2008 trip payment	
	Make your check payable to "NCHS Bands"	\$143.00
	Total	\$143.00

Please Include with your payment		No.3
Students Name: Parents/Guardian Name: Email Address: Phone Number:		Mail to: Kelli Gibbons 37 Paige Place Bloomington, IL. 61704
Date	Description	Amount
06/15/2008	Fiesta Bowl 2008 trip payment	
	Make your check payable to "NCHS Bands"	\$143.00
	Total	\$143.00

Please Include with your payment		No.4
Students Name: Parents/Guardian Name: Email Address: Phone Number:	Mail to: Kelli Gibbons 37 Paige Place Bloomington, IL. 61704	
Date DUE	Description	Amount
07/15/2008	Fiesta Bowl 2008 trip payment	
	Make your check payable to "NCHS Bands"	\$143.00
	Total	\$143.00

Please Include with your payment		No.5
Students Name: Parents/Guardian Name: Email Address: Phone Number:	Mail to: Kelli Gibbons 37 Paige Place Bloomington, IL. 61704	
Date	Description	Amount
08/15/2008	Fiesta Bowl 2008 trip payment	
	Make your check payable to "NCHS Bands"	\$143.00
	Total	\$143.00

Please Include with your payment		No.6
Students Name: Parents/Guardian Name: Email Address: Phone Number:	Mail to: Kelli Gibbons 37 Paige Place Bloomington, IL. 61704	
Date	Description	Amount
09/15/2008	Fiesta Bowl 2008 trip payment	
	Make your check payable to "NCHS Bands"	\$143.00
	Total	\$143.00

Please Include with your payment		No.7
Students Name: Parents/Guardian Name: Email Address: Phone Number:		Mail to: Kelli Gibbons 37 Paige Place Bloomington, IL. 61704
Date DUE	Description	Amount
10/15/2008	Fiesta Bowl 2008 trip payment	\$143.00
	Make your check payable to "NCHS Bands"	
	Total	\$143.00

Please Include with your payment		No.8
Students Name: Parents/Guardian Name: Email Address: Phone Number:		Mail to: Kelli Gibbons 37 Paige Place Bloomington, IL. 61704
Date	Description	Amount
11/15/2008	Fiesta Bowl 2008 trip payment	\$143.00
	Make your check payable to "NCHS Bands"	
	Total	\$143.00

		NO.
		AMOUNT