

CHECK NO. \_\_\_\_\_ ACCT. NO. \_\_\_\_\_  
NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

**JAN FEB MAR** APR MAY JUN JULY  
**AUG SEP OCT NOV DEC** Late fee  
due after the **14th** of the month.  
Please circle the month this payment  
is for and send a coupon for each  
month paid.

**REMIT TO:**

**WALDEN WOODS CSA  
7900 STEUBENVILLE PIKE  
SUITE 20  
IMPERIAL, PA. 15126**

**AMOUNT DUE: 135.00  
LATE FEE: 2.00  
AMOUNT PAID: \_\_\_\_\_**

Email address: \_\_\_\_\_

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