

**INVOICE**



12301 Kiln Ct. Ste A  
Beltsville, MD 20705  
877-227-3274

Return Service Requested

Account Number: 4716437  
Invoice Number: 22351931  
Invoice Date: 06/01/2013  
**Due Date: 07/01/2013**  
**Amount Due: 694.25**  
**Amount Enclosed:** \$ \_\_\_\_\_

Please write your account number on your check. Use the enclosed envelope and make checks payable to:

Please check here if you have provided updated address or payment information on the reverse side.

1064001049 PRESORT 1049 1 AV 0.360 P1C6 <B>



WAREHOUSE  
HIDALGO COUNTY PCT 1  
1902 JOE STEPHENS AVE  
WESLACO TX 78596-3700

ASG Security  
PO Box 650837  
Dallas, TX 75265-0837



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To ensure proper credit, please return this portion with your payment.



314 Ash Avenue  
McAllen, TX 78501

**Mailing Address:** Hidalgo County Pct 1  
1902 Joe Stephens Ave  
Weslaco, TX 78596

**Account Information**

Account Number: 4716437  
Invoice Number: 22351931  
Invoice Date: 06/01/2013

**Summary Of Charges**

Previous account balance as of 06/01/13 667.75

Description	Qty	Unit Price	Amount
Remember to test your system monthly. PO# 673590			
Hidalgo Co. Pct #1 1902 Joe Stephens Avenue			26.50
Security Monitoring 07/01/13 - 07/31/13			26.50
Current Charges			\$0.00
Payments Applied			
<b>Total Amount Due</b>			<b>694.25</b>

**Important Messages**



**FRAUD ALERT:** Beware of the Summer Scammers! Some alarm companies hire seasonal door-to-door sales people that will make false statements and use deceptive tactics to try to get you to switch alarm companies. Be cautious if you hear:

- "Your alarm company has gone out of business"
- "We bought your alarm company"
- "I'm with the manufacturer and I am authorized to provide you with a free upgrade"

They may even say that they are with ASG Security to get into your home or business. ASG Security representatives always carry a photo ID and ASG Security business cards. Always ask for one.

You can verify your account with ASG by calling **877-227-3274**.

PCT. # 1  
ROAD & BRIDGE  
-1202-431-00-121-005-0-413

CURRENT	OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS
\$26.50	\$26.50	\$641.25	\$0.00

*Direct Payment*  
INVOICE RECEIVED BY  
*Marcus* on *6/11/13*  
GOODS/SERVICES RECEIVED BY  
*Sam Demands* on *7/01/13-7/31/13*

**Have you moved or changed your phone number?**  Moved  Phone Number

Please provide your new address or telephone number and return this portion with your payment. Your records will be updated on request. This will update your account information only. To update your emergency call list please fax information to: 301-210-2837.

Effective Date: \_\_\_\_\_ Account Name: \_\_\_\_\_  
 New Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Work Number: \_\_\_\_\_ Signature: \_\_\_\_\_


**We accept the following credit cards for payment:**  DISCOVER  VISA  MasterCard  AMERICAN EXPRESS

Please choose one:  Monthly Recurring  One-Time only  
 Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Amount Authorized (for one time only): \$ \_\_\_\_\_ Signature: \_\_\_\_\_

**Automatic Withdrawal from Checking (IMPORTANT: Please enclose a copy of a voided check.)**

Please use automatic withdrawal from checking for all future charges  Please use automatic withdrawal from checking this time only  
 Amount Authorized \$ \_\_\_\_\_ Signature: \_\_\_\_\_

**How To Read Your Invoice**



12301 Kiln Ct. Ste A  
Beltsville, MD 20705  
877-227-3274

Return Service Requested

**INVOICE**


1 Account Number: 1234567  
 2 Invoice Number: 12345678  
 3 Invoice Date: 05/01/2011  
 4 Due Date: 05/31/2011  
 5 Amount Due: \$ 35.72  
 6 Amount Enclosed: \$ \_\_\_\_\_

Please write your account number on your check. Use the enclosed envelope and make checks payable to:

6  Please check here if you have provided updated address or payment information on the reverse side.


BILL SAMPLE  
123 MAIN STREET  
ANYTOWN, USA 12345-6789

7 ASG Security  
PO Box 41425  
Philadelphia, PA 19101-1425



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To ensure proper credit, please return this portion with your payment.



875 W Sandy Lake Road, Ste 400  
Coppell TX, 75019  
469-528-6500

Mailing Address: Bill Sample  
123 Main Street  
Anytown, USA 12345-6789


**Account Information**

Account Number: 1234567  
 Invoice Number: 12345678  
 Invoice Date: 05/01/2011

**9 Summary Of Charges**

Description	Qty	Unit Price	Amount
Remember to test your system monthly.			
Bill Sample 123 Main Street			
Alarm Monitoring Services 06/01/11 - 06/30/11			22.00
Maintenance Services 06/01/11 - 06/30/11			11.00
Sales Tax			2.72
Current Charges			35.72
Payments			\$0.00
<b>Total Amount Due</b>			<b>35.72</b>

**8 Important Messages**



Offering affordable technology you never thought possible

www.asgsecurity.com  
877.227.3274

- 1 **Account Number** – Your customer number. It will be helpful to have this number when calling customer service.
- 2 **Invoice Number** – This is the number that is assigned to a specific bill. Payments are applied to the oldest invoice unless a remittance coupon or invoice number are provided with your payment.
- 3 **Due Date** – Bill must be paid before the Due Date to avoid a late fee.
- 4 **Amount Due** – Charges that require payment prior to the due date.
- 5 **Amount Enclosed** – Please indicate the payment amount included with your remittance.
- 6 **Check Box** – If you have written anything on the front or back of the remittance stub that requires our attention, please be sure to check the box.
- 7 **Remit Address** – Please mail payment to this address.
- 8 **Important Messages** – Watch this space for important information concerning your account.
- 9 **Summary of Charges** – Information pertaining to services provided.