The Atlanta-Decatur Dart Association

MONDAY LEAGUE INVOICE DUE UPON RECEIPT



Billed to:			Team Name(s):
Attention:			
Date:			
Bar Fee Per Team:	\$70		
Number of Teams:			
Bar Fee Total:			
Player Fee per Player:		(Fee depends	on representation at league meeting)
Number Players Paid by Bar:			
Player Fee Total:			
TOTAL AMOUNT DUE:			

Make checks payable to: ADDA

ADDA % Wade Moricle 47 Wiltshire Drive Avondale Estates, GA 30002