

# COURSEFPX



**Billing To**  
**Date Invoice**

Firstname Lastname  
14th May 2024

INVOICE: FL51420241

ITEM DESCRIPTION	QTY	PRICE	TOTAL
Consultation	01	0.00	0.00
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-

*Rupert Mcmillian*

**FINANCE ADMINISTRATOR**

Subtotal \$100.00  
Tax 0%

**TOTAL \$000.00**

**Term & Condition :**

This invoice serves as the confidential proof of purchase as well as NDA for the purchase.

**coursefpX.**

Inquire: [contact@coursefpX.com](mailto:contact@coursefpX.com)  
contact: 570) 212-9855