

# INVOICE

\_\_\_\_\_  
SCHOOL NAME AND NUMBER

\_\_\_\_\_  
PURCHASE ORDER NUMBER

\_\_\_\_\_  
ACTIVITY FUND

\_\_\_\_\_  
ACCOUNT NUMBER

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
OBJECT NUMBER

\_\_\_\_\_  
PAYEE OR FIRM

\_\_\_\_\_  
STREET

\_\_\_\_\_  
REQUESTED BY

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE AND ZIP CODE

\_\_\_\_\_  
DESCRIPTION

\_\_\_\_\_  
COST

\_\_\_\_\_