FORT BEND COUNTY AUDITOR ACCOUNTS PAYABLE County Auditor Form 1016 (Rev. 11/07)

INVOICE TRANSMITTAL

Vendor #		
Vendor Name		
OAKBEND DOCTORS CENTER		
Address		
1601 MAIN ST		
City		
RICHMOND		
State Zip Code		
TX 77469		

Invoice #/Invoice Date/Desc	Amount
AUGUST 2010 RENTAL PAYMENT FOR 1601 MAIN,	4,936.41
SUITE 104, RICHMOND, TX 77469. FORT BEND	
PHYSICIANS CLINIC	
	Total 4,936.41

County Auditor's Use Only		
CC Approval Date		
Check Type		
Audited By		
Received		
Paid		

Authorized Department Approval

Date 08/04/10

Treasurer's Register Stamp and Number

<u>OAKBEND DOCTORS' CENTER</u>

c/o OAK BEND MEDICAL OFFICE, LTD. 1601 Main Street Richmond, Texas 77469 (281) 341-1800

Fort Bend County Indigent Health Care

Attn: Karl Lavine

4520 Reading Rd., STE A Rosenberg, TX 77471

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Base rent for the month of August 2010 \$ 4,400.00 2010 Additional Rental Payment \$ <u>536</u>.41 August 2010 Total Rental Payment Due \$ 4,936.41

MAKE CHECK PAYABLE TO:

Oak Bend Medical Office, Ltd.

MAIL TO:

OAKBEND MEDICAL OFFICE, LTD

ATTN: JENNIFER SANFORD 1601 Main Street, Suite 212

Richmond, TX 77469

TERMS: Rent is due by the first of each month.