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

Accounting Unit (9 digit) 225560112

INVOICE TRANSMITTAL

Vendor#

Vendor Name

ONE TIME VENDOR

Account (5 digit)	Paul Die	thius		
54170	Address			
Grants & Projects (If needed)	19585 H	wy 35		
Activity	City			
n/a	ALVIN			
Account Category	State		Zip Code	Date
n/a	TX		77511	
Invoice #/Invoice Date/Desc		1	Amount	
Auction Refund				2,000.00
			-	
		-		
		4		
			Total	
			Total	2,000.00
		/		1
County Auditor's Use Only		1/1	1 1 1	
CC Approval Date		IV VI	171/	
Check Type		//	WY	4
			Authorized Depa	Aftment Approval
Audited By		Tre	easurer's Register	r Stamp and Number
Received		1,000		
Paid				
r alu				