

INVOICE TRANSMITTAL

Accounting Unit (9 digit)
100667100
Account (5 digit)
6671A
Grants & Projects (If needed)
Activity
63000
Account Category
n/a

Vendor #	13400	
Vendor Name	Sprint	
Address	PO Box 4181	
City	Carol Stream	
State	Zip Code	Date
IL	60197-4181	02/08/12

Invoice #/Invoice Date/Desc
10-20-11 Air Card (42.99) Inv# 678116844-014 Cell (174.65) Inv#919702299-036
11-20-11 Air Card (42.99) Inv# 678116844-015 Cell (174.65) Inv#919702299-037
12-20-11 Air Card (42.99) Inv# 678116844-016 Cell (174.65) Inv#919702299-038
Reversal PO not processed until January 2012.

Amount
Air Card Total (Oct.Nov.Dec.) = 128.97
Cell Total (Oct.Nov.Dec.) = 523.95
Total
652.92

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



 Authorized Department Approval

Treasurer's Register Stamp and Number
