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

INVOICE TRANSMITTAL

Accounting only (9 digit)	Vendor # 12170 Vendor Name Joe W. Mask Address		
100665100			
Account (5 digit)			
63600			
Grants & Projects (If needed)	140		
Activity	City		
Account Category	State	Zip Code	Date 01/17/13
Invoice #/Invoice Date/Desc		Amount	
		Amount	N
Invoice #59739 to Damon Farm & Ranch	2		49.50
for 1 set of Clipper Blades Lister Surgical	* .	-	let
Had to have for 4-H Projects during Fair		3	×
(DID NOT OBTAIN PRIOR P.O.)	ő e	·	
, , , , , , , , , , , , , , , , , , ,			
		l Total	49.50
			43.50
County Auditor's Use Only		* *	
CC Approval Date			
Check Type		Mid In	
		Authorized Dep	artment Approval
Audited By	-	Treasurer's Registe	r Stamp and Number
Received		Treasurer's registe	Otamp and Number
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P.1/1

DEC-19-2012 16:50 From: FAX 9797423889

3406 C.R. 264N / P.O. Box 330 (MAILING)

Damon, Texas 77430

PHONE: (979)742-3317 / FAX: (979)742-3889



Invoice: 59739

Date: 10/01/2012

Time: 10.35.09 AM

Drawer: 01

Employee: TIM

Page: 1 of 1

REPRINT *!*

JOE & JULIE MASK RAFTER M CATTLE 918 PECAN VALLEY WHARTON, TX 77488

Extended Quantity Description Exempt Disc. UOM Price

1.000 CLIPPER BLADE LISTER SURGICAL

EΑ

\$49.50

\$49.50

! REPRINT *!* Date: 12/19/2012/ Time: 03:54:40 PM

Subtotal:

\$49.50

Tax (6.750):

\$0.00

Total:

\$49.50

Tendered:

\$0.00

Change:

\$0.00

Charge

I claim an exemption from payment of sales taxes under chapter 20, Title 122A for the purchase of taxable items described above. I certify that these SIGNEE/ACCOUNT HOLDER AGREES TO PAY ALL CHARGES BY THE 151H OF MONTH AFTER BILLING. A 1.5% PER MONTH...

Exemption Signature

Signature