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

INVOICE TRANSMITTAL

Accounting Unit (9 digit)
100640100
Account (5 digit)
63100
Grants & Projects (If needed)
Activity
Account Category
PROFESSIONAL SERVICES

Vendor #	14606	
Vendor Name		
OAK BEND MEDICAL GROUP		
Address		
4911 SAND HILL DR		
City		
SUGAR LAND		
State	**Zip Code**	**Date**
TX	77479	8.14.13

Invoice #/Invoice Date/Desc	Amount
Aug-13	16,666.67
Total	**16,666.67**

County Auditor's Use Only

CC Approval Date _____

Check Type _____

Audited By _____

Received

Paid

Karl Lavine (MH)
Authorized Department Approval

Treasurer's Register Stamp and Number

OakBend Medical Group

1705 Jackson Street
Richmond, TX 77469

INVOICE

July 19, 2013

Ft. Bend County Indigent Program
4520 Reading Rd, Ste. A
Rosenberg, TX 77471
(281) 341-6624/Fax (281) 341-1528

Capitation Payment for August 2013 (Per the contractual agreement between the Ft. Bend County Indigent Program and OakBend Medical Group)	**$16,666.67**

Please make check payable to OakBend Medical Group, Attn: Accounting Department, 1705 Jackson, Richmond, TX 77469.

This payment is due by the 5th of the month for services furnished in the prior month. Due by September 5, 2013