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

Accounting Unit (9 digit)

440570999

INVOICE TRANSMITTAL

Vendor #

Vendor Name

19394

Account (5 digit) AAA Paym			Sales & Sei	rvice	14	
63500						
Grants & Projects (If needed)	chnut S	Suite 209				
Activity	City					
G570-14SUPERVSN	Houston					
Account Category	State		Zip Code		Date	
22500	TX	The same and the same	7709	06 0	6/23/14	
Invoice #/Invoice Date/Desc		1	Amount			
Invoice# 22013					249.00	
Invoice# 22020		Γ			155.00	
			Total			
		L			404.00	
County Auditor's Use Only						
CC Approval Date						
Check Type	Michael Evan					
Audited By		Authorized Department Approval				
Received		Treas	surer's Regis	ter Stamp a	nd Number	
received						
Paid					,	

AAA PAYMASTER SALES & SERVICE STEPHEN LILLY

4660 Beechnut Suite 209 HOUSTON, TEXAS 77096 (713) 667-7541 CELL# (713) 301-1994

NAME		FORT 1	3 6 n	10 County	4		DA	3/17/	14	
ADDRESS	/	ADULT	-	PROBATEUR	D	EP4				
CITY		LOSENBA	ik.	TX			PH	ONE .		
MAKE	MAKE PAYNASTA MODEL 828 SERIAL NO.							-	C.O.D. ARGE	
NATURE OF	SER	/ICE						'A		
							PRO	MISED	/ /	4
QUAN.		PART NO.		DES	CRIPTIC	N		PRICE	AMO	UNT
	1			SORVEDCO		CAR			59	50
	2									
	3	BLACE		INK RO	CEA				189	50
	4								d-respectations	
	5	_							249	00
	6									
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	11									
	12									
COMMENTS								TOTAL MATERIALS		
								TECHNICAL SERVICE TIME		
				DATE COMPLE	TED	/	/	TAX		
TECHNICIAN					CAS	ON OF W	OMPLETION ORK	TOTAL	249	00
Signature below constitutes acceptance of above service performed as being satisfactory – and that equipment has been left in good condition.										
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22013

AAA PAYMASTER SALES & SERVICE STEPHEN LILLY

4660 Beechnut Suite 209 HOUSTON, TEXAS 77096 (713) 667-7541 CELL# (713) 301-1994

NAME	For	ar Bea	ro Co	unty				DATE 3	131/1	4	
ADDRESS AD YLT PROGRESON CITY - PHONE											
ROSENBERG TX PHONE											
MAKE PAYONSTOR MODEL SERIAL NO.								C.O.D. ARGE			
NATURE OF	SERVI	CE									
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COMMENTS									TOTAL MATERIALS		
									TECHNICAL SERVICE TIME		
									TIME		
			DATE	COMPLETE	D	/	/		TAX		
TECHNICIAN	S	fere Caly	; P		CAS	SH of	COMPLE WORK —	TION '	TOTAL	155	80
Signature below constitutes acceptance of above service performed as being satisfactory – and that equipment has been left in good condition. Thank You								ou			
22020											