

INVOICE TRANSMITTAL

Accounting Unit (9 digit)
100638100
Account (5 digit)
63600
Grants & Projects (If needed)
Activity
Account Category

Vendor #	13879 36	
Vendor Name	Fort Bend County Environmental Health	
Address	4520 Reading Rd., Suite A-800	
City	Rosenberg	
State	Zip Code	Date
TX	77471	11/01/18

Invoice #/Invoice Date/Desc
Replace counterfeit \$20.00 received from customer.
Support staff does not remember customer that
passed the \$20.00 for payment nor the date
received. Counterfeit was not detected till deposit
was being processed in the treasures department.
The date range received is between 10/12-17/18.

Amount
20.00
Total
20.00

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

Kandace Kylee 11/1/18

 Authorized Department Approval
Administrative Services Coordinator

 Treasurer's Register Stamp and Number