

ENDOR # P.O. #	VENDOR NAME & ADDRESS INVOICE # & INVOICE DATE	F/P TYPE	ITEM NO	DESCRIPTION	ACCOUNT NUMBER	AMOUNT
9033 72814	MELVIN CALDWELL 7/28/2014	B	1	PUR SERVICES ADMIN CENTER SUPT OTH 10 2320 390 10 35		2,500.00
				SUB-TOTAL		2,500.00
				EDUCATION		2,500.00

ENDOR #	VENDOR NAME & ADDRESS	F/P	ITEM			
P.O. #	INVOICE # & INVOICE DATE	TYPE	NO	DESCRIPTION	ACCOUNT NUMBER	AMOUNT
				EDUCATION	10	2,500.00
				GRAND TOTAL		2,500.00

-----  
 PRESIDENT

-----  
 SECRETARY