Form F-75 Rev. 9/06

## Commonwealth of Kentucky DEPARTMENT OF EDUCATION 1

Bureau of Finance

Purchase Order No	) <u>.                                    </u>
Terms	
Date Filed	

## STANDARD INVOICE

(This invoice should be sent directly to the local Board of Education for payment. Do not send to State Office.)

## JENKINS INDEPENDENT BOARD OF EDUCATION, P.O. BOX 74, JENKINS, KENTUCKY

Name of Vendor \_\_\_\_\_

Address \_\_\_\_\_

uantity	Unit	Items (furnished) or Work (done)	*Code No.	Unit Price	Amount
+					
+					
			VEND	VENDOR LEAVE BLANK	
			Claim No.	Claim No.	
				Check No.	
		Amount Paid			
Approved for payment by			Date Paid		