

STANDARD INVOICE

Hardin County Board of Education
65 W. A. Jenkins Road
Elizabethtown, KY 42701

Vendor W-9 On File <input type="checkbox"/> Yes <input type="checkbox"/> No

VENDOR NAME: _____

EMPLOYEE NAME: _____

Send Check To: **School** _____

Hold at Central Office _____

Mail to: _____

(All invoices must be promptly made out in required form and filed with the Board "in writing, itemized and verified" - according to law. A properly prepared invoice shows exact kind of service, where, when, and by whom performed; also time and rate per day or hour and is signed by the vendor or his/her authorized representative.)

DATE	DESCRIPTION	AMOUNT

Note: Staple receipts to back of standard invoice. State Tax will not be reimbursed.

For C. O. Use VENDOR	ORG# UNIT-FUND-KEY	OBJECT	PROJECT	FUNDING APPROVAL SIGNATURE	TOTAL AMOUNT

VENDOR'S CERTIFICATION

TOTAL STANDARD INVOICE \$

I hereby certify that the above is a correct statement of amount due from the above named board of education for articles furnished or services rendered as itemized.

Signed _____
Vendor/Employee

Date _____

C.O. Use Only: Invoices for attached Check have been checked by HCBE/AP/_____
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