



# UNIVERSITY OF SOUTHERN COLORADO

ACCOUNTING OFFICE

2200 BONFORTE BLVD. PUEBLO, COLORADO 81001-4901

## STATEMENT OF ACCOUNT

ACCOUNT NUMBER	BILLING DATE	AMOUNT DUE	DATE DUE	AMOUNT ENCLOSED
720-00-0360	06/03/87	1,320.13		

IF THERE ANY DISCREPANCIES, PLEASE BRING THIS STATEMENT AND ANY DOCUMENTATION TO THE ACCOUNTING OFFICE FOR CORRECTION OR CALL 549-2232.

ORR DR GILBERT  
41 BELVISTA CT  
PUEBLO

CO 81001

PLEASE RETURN THIS PORTION WITH YOUR REMITTANCE



# UNIVERSITY OF SOUTHERN COLORADO

ACCOUNTING OFFICE

2200 BONFORTE BLVD. PUEBLO, COLORADO 81001-4901

## DETAIL STATEMENT OF ACCOUNT

DESCRIPTION	DATE	REFERENCE	AMOUNT	TOTAL
PREVIOUS BALANCE	05/07/87			0.00
SALES-BANQUET	05/20/87	4543	1,320.13	
			=====	
TOTAL CHARGES	06/03/87		(+)	1,320.13
			=====	
TOTAL CREDITS	06/03/87		(-)	0.00
				=====

  

ACCOUNT NUMBER	NAME	BILLING DATE	DATE DUE	AMOUNT DUE
720-00-0360	ORR DR GILBERT	06/03/87	06/25/87	\$1,320.13

INVOICE # NO 4543

INVOICE  
UNIVERSITY OF SOUTHERN COLORADO  
AUXILIARY SERVICES

COMMERCIAL XXXX

IDV \_\_\_\_\_

INVOICE DATE 5/5/87

SPONSOR # 720-00-0360

BILL TO: Dr. Gilbert Orr  
MAA Rocky Mt. Sectional Mtg.  
41 Belyista Court  
Pueblo, CO 81001

DATE(S) OF SERVICES: April 24, 25, 1987

BILLING AUTHORIZED BY: Dr. Gilbert Orr

DESCRIPTION	CREDIT ACCT #	REF.	AMOUNT
Residence Hall Facilities	401 121 611	_____	_____
University Center Facilities	401 131 612	_____	_____
Catering	401 115 624	<u>739331</u>	<u>\$1,320.13</u>
Personnel Services	401 131 602	_____	_____
Print Shop	100 116 623	_____	_____
TOTAL PAYABLE			<u>\$1,320.13</u>

PLEASE REFER TO THIS  
INVOICE # WHEN PAYING

REMIT TO: Accounting Office  
University of Southern Colorado  
2200 N. Bonforte Blvd.  
Pueblo, Colorado 81001

CAMPUS USE ONLY (IDV) (All object code 884 billings must be accompanied by a completed official functions form)

DEBIT this account \_\_\_\_\_  
OFFSET \_\_\_\_\_

OFFSET \_\_\_\_\_  
CREDIT this account \_\_\_\_\_

DEBIT this account \_\_\_\_\_  
OFFSET \_\_\_\_\_

OFFSET \_\_\_\_\_  
CREDIT this account \_\_\_\_\_

DEBIT this account \_\_\_\_\_  
OFFSET \_\_\_\_\_

OFFSET \_\_\_\_\_  
CREDIT this account \_\_\_\_\_

SIGNATURE Per Attached  
(Responsibility Center Manager)

SIGNATURE [Signature]  
(Responsibility Center Manager)