

SEND
INVOICE
TO:

BOARD OF EDUCATION
MOGADORE LOCAL SCHOOL DISTRICT
1 SOUTH CLEVELAND AVE. MOGADORE, OHIO 44260
PHONE (330) 628-9945
FAX (330) 628-6661

05/01/2015 No. 0055753753 Page: 1

THE PURCHASE ORDER NUMBER MUST APPEAR ON ALL INVOICE PACKAGES AND CORRESPONDENCE INVOICE EACH PURCHASE ORD INDIVIDUALLY AND IN DUPLICATE

VENDOR:
461555
MAC TO SCHOOL
3034 SCOTT BLVD
SANTA CLARA GA 95054

SHIP TO:
MOGADORE LOCAL SCHOOLS
TREASURER'S OFFICE
1 S CLEVELAND AVE
MOGADORE OH 44260

Phone: Fax:

REF: LA0449

PLEASE SHIP PREPAID BEST WAY

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL PRICE
1		imac lab high school	20,970.00	20,970.00
TOTAL			PAGE	20,970.00

TI	FUND	FUNC.	OBJ.	SPCC	SUBJ	OPU	IL	JOB	AMOUNT
05	001	2229	640	0000	000000	900	00	000	20970.00

SCHOOL DISTRICTS ARE EXEMPT FROM FEDERAL EXCISE TAXES AND OHIO SALES TAX. USE NO. 417731

TREASURER'S CERTIFICATE

It is hereby certified that the above amount required to meet the contract, agreement, obligation, payment or expenditure for the above, has been lawfully appropriated or authorized or directed for such purpose and is in the treasury or in process of collection to the credit of the Funds of the Board of Education free from any obligation or certification now outstanding.

CP. [Signature]
TREASURER BOARD OF EDUCATION
5/1/15
DATE