

Subject: Account Payable Setup [#126]

Date: Tuesday, September 22, 2020 at 4:16:06 PM Pacific Daylight Time

From: Tech To School

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School/District/Company Name *	BROCKTON SCHOOL DISTRICT
Organization Type *	<input checked="" type="radio"/> Public
First Name *	Margie
Last Name *	Shanks
Position/Title	District Clerk
Email *	mshanks@brockton.k12.mt.us
Phone Number *	4067863311
Address *	<input type="checkbox"/> 215 N. 5TH STREET BROCKTON, MT 59213 United States
First Name *	Cynthia
Last Name *	Glavin
Email *	cglavin@brockton.k12.mt.us
Attach a Purchase Order or File	<input type="checkbox"/> brockton_school_district_5555f.pdf 421.84 KB · PDF
Include any other additional info or requests here:	Thank you!