INVOICE

TOTAL DUE

\$

nvoice# (if applicable): nvoice Date: PSA# (If Applicable): Purchase Order# (If Applicable):		EMAIL INVOICE AND DISBURSEMENT FORM TO: AP@CCSU.EDU Accounts Payable Central Connecticut State University 1615 Stanley Street New Britain, CT 06053		
Payee/Vendor's Name				
Payee/Vendor's Ad	dress:			
COMMENTS OR SPECIA	AL INSTRUCTIONS: DESCRIPTION & DATE	OF SERVICE	UNIT PRICE	TOTAL
ζο/		<u> </u>	\$	\$
			Ψ	Ψ