FOOTHILL-DE ANZA
Community College District

INVOICE FOR SERVICES RENDERED

De Anza College ☐ Foothill College ☐ District Office ☐ Foundation ☐

PURCHASE ORDER NO: _____

INVOICE NO: _____

BANNER ID:
BANNER INV:
For Accounting Use Only

FUND (6 digits)	**ORG** (6 digits)	**ACCT** (4 digits)	**PROG** (6 digits)	**AMOUNT**
			TOTAL:	

PAY TO:

(Name/Contractor) _____

(Street Address) _____

(City/State/Zip /Code) _____

(Phone Number)_____ (Social Security or Tax I.D.) _____

Are you a Retiree under: STRS Yes ☐ No ☐

PERS Yes ☐ No ☐

PAY: $ _____

FOR SERVICES RENDERED (Description of Services): _____

_____

_____

DATE OF SERVICES RENDERED: _____

SIGNATURES:

(Provider of Services) _____ First & Last Name (PLEASE PRINT) _____ Date _____ SIGNATURE (Required)

(College/District Approval) _____ First & Last Name (PLEASE PRINT) _____ Date _____ SIGNATURE (Required)

_____ Date Approved by Board of Trustees if the total cost exceeds $14,999 for public projects or $20,000 for other services.

Please refer to url: http://purchasing.fhda.edu/policies for Delegations of Purchasing and Contracting Authority Approvals

INVOICE TO BE PROCESSED FOR PAYMENT AFTER COMPLETION OF SERVICES.
PROCESSING TIME REQUIRED FOR A PAYMENT IS APPROXIMATELY FOUR WEEKS.