

**SCHOOL ACTIVITY FUND  
STANDARD INVOICE**

F-SA-8

School
Activity Fund

Date
Tax I.D. No.

Approval for Purchase

\_\_\_\_\_  
Principal

Vendor's Name _____			
Address _____			
Quantity	Item Description	Unit Cost	Total Cost
<b>Total</b>			

**Vendor's Certification**

I hereby certify that the above is a correct statement of amount due from the above named school for articles furnished or services rendered as itemized.

\_\_\_\_\_  
Vendor

Approved for Payment

\_\_\_\_\_  
Sponsor

\_\_\_\_\_  
Principal

Attach Itemized Receipt if Applicable
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Amount Paid	_____
Date Paid	_____
Check No.	_____