


Invoice Number _____ Date Prepared _____

TC 50

Budget Number _____ Object Code _____ TASK _____ OPTN _____ PROJECT _____

VENDOR NUMBER <small>(If any)</small>	U.S. TAXPAYER ID NUMBER	1099 TYPE <small>(Fin. Svc. use only)</small>	Name as recorded with IRS or Social Security Permanent address (including Apartment number) Permanent address (extra line, if needed) City, State and ZIP code	U.S. Dollar Amount	Liq. Code
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N


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			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
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			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
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			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N
			1. 3. 4. 5.		N

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