

--- 39,43 97.07 \$136,50

2018-2019 VOUCHER

HOMER KACHEMAK BAY ROTARY CLUB.

Please print legibly

DATE: 1/9/20 PAYEE: Brand	<i>y</i>
ADDRESS IF NEED TO MAIL:	
City	State Zip
DESCRIPTION: Supplies Pa	Spit shellor construction
REQUESTED BY:	SIGNATURE: Dave () Drage
AMOUNT 136.5% 00	GL# from BUDGET
	IBERS BEFORE TURNING IN TO TREASURER
Sila (alg 14202	e CF39 Tunde
Board Member Signature & Date	Board Member Signature & Date

rd Builders Supp

(907)235-6971 = SPENARD HOMER 65491 3978 LAKE STREET.

HOMER, AK 99603

1060

INVOICE NO. DATE 12-23-19 80230865

SALE **

TERMS

CASH

12.49

3.23

PG

EXTENSION

24.98

3.23

615056 CASH BRANN DAVE

JOR NO.

T BOX 1901 o HOMER, AK 99603-0000

(HERINAFTER REFERRED TO AS CUSTOMER)

12/23 2019 CREDIT CARD 12:30:01

ANN DAVE

: MIX M/P

PK

VISA SALE

1

Card # Chip Card: AID:

SEQ #:

Batch #:

INVOICE

Mode:

Approval Code:

Entry Method:

90

CUST, ORDE

Visa Credit A0000000031010

Chip Read

Issuer

\$39.43

TE SHIPPED SALES ORDER # UNIT PRICE

EA

EA

ORDERED SHIPPED B:0 ITEM NO. 2 **60FASTCON** 4GRGELSG2PK 1 LOC1395391 1 KK0057

SALE AMOUNT Thank you for your business!

EA 3.68 3.68 Z BLACK EA 4.67 4.67

CUSTOMER COPY

PEN/AK 7.85% HOMER/KENAI

TOTAL WEIGHT 120.91

2.87

SALES TAX

.00 LML357S SHIPPING CHARGE MISCELLANEOUS

39.43 AMOUNT DUE

P900242 ALASKA CHAMELN COMMISSION

SHIPPED FROM

HOMRAKYD

36.56

SALES AMOUNT

BUYER: DAVE BRANN ENT BY: Lucky Lorenz ***CPU***

TERMS & CONDITIONS can be found at

AK0301

TAX CODE

Payment method : VISA DUE DATE

12-23-19



AMORE GLASS

4 The Light Chine Int

371 Lakeshore Drive

JMER, ALASKA 99603

TEL (907) 235-8505

FAX (907), 236-8065

WORK ORDER INVOICE

70464

Kdert	DATE OF ORDER	
water Pavillian on Spit	RES. PHONE 9-085 2	
	BUS, PHONE	
INSURANCE CO. /AGENT	POLICY NO.	
ADDRESS	YEAR, MAKE, MODEL	ODEL
DELIVERY DIRECTIONS		
	☐ FURNISH & INSTALL	
SOLD BY CASH CHECK C.O.D. CHARGE ON ACK	T ELIDNICH ONLY	=R
QTY. SIZE DESCRIPTION		
1 29/ VAIL W+	AMOUNT	12
TI DIA XABTALIEMY	CVEC GERLES	
	650	0
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	1	
- GVO	cle of their 251	T C
- 1 Fra		
DESCRIPTION OF WORK		-
110000	em Deveel	
W1: Y-1 1 600 -01		
10 vad oberind		
40x22 opening		
JOVOS Oberlied		
TERMS: Due upon receipt.		
TERMS: Due upon receipt.	TOTAL	
TERMS: Due upon receipt. STATEMENT OF AUTHORIZATION AND SATISFACTION Replacement or repair has been made to my satisfaction and	MATERIAL	
STATEMENT OF AUTHORIZATION AND SATISFACTION Replacement or repair has been made to my satisfaction and I hereby authorize the above insurance company to pay direct in full to the above listed firm for said installation. If for pays are said installation.	TOTAL MATERIAL TOTAL LABOR	
TERMS: Due upon receipt. STATEMENT OF AUTHORIZATION AND SATISFACTION Replacement or repair has been made to my satisfaction and I lereby authorize the above insurance company to pay direct in full to he above listed firm for said installation. If for any reason the insurance company does not new for these repairs or replacement.	MATERIAL TOTAL	0
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TERMS: Due upon receipt.	MATERIAL TOTAL LABOR 90:0	07
STATEMENT OF AUTHORIZATION AND SATISFACTION Replacement or repair has been made to my satisfaction and I hereby authorize the above insurance company to pay direct in full to the above listed firm for said installation. If for any reason the insurance company does not pay for these repairs or replacements, the below signed agrees to pay for said repairs or replacement.	TAX 7:0	07

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