



Requisition No
 Po No

Vendor RAMOS, ELIZARDO JR
 Address C/O HEALTH DEPT.

Owner JESCALANTE

Date Entered 01-30-2013
 Status Disapproved Requisition

Line No	Quantity	Description	Unit Price	Payment Amount
1	1	REIMBUREMENT FOR RENEWAL OF NONCOMMERCIAL POLITICAL	12.0000	12.00

Total 12.00

Account Number	Description	Account Balance	Amount
3-1100-441-00-340-001-0-811	HEALTH ADM-LICENSES & PERMITS	1,026.00	12.00