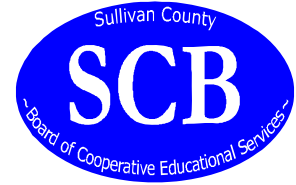


ARTS IN EDUCATION
INVOICE 2007-2008



Don't Forget!!

Upon **COMPLETION** of program, **FILL OUT AND SIGN** this invoice.
Fax or Mail to Sullivan County BOCES
Payment will be made after receipt of signed invoice
and completed evaluation forms from school.

TO: SULLIVAN COUNTY BOCES
6 WIERK AVE
LIBERTY NY 12754

From: _____
 vendor/organization

Tax ID#: _____

Mailing Address: _____

Phone #: _____ **Fax#:** _____

Signature: _____

Performance Title: _____

District/School: _____

Date of event: _____

FEE: \$ _____ **TOTAL DUE: \$** _____



SEND TO:

Sullivan County Boces
Andrea Brown, Coordinator
Arts in Education
6 Wierk Ave
Liberty NY 12754
Phone# : (845) 295-4033
Fax#: (845) 295-3416