

INVOICE VOUCHER

P.O. NO. _____

ACCOUNTING USE ONLY

VENDOR NUMBER

552

TERMS

INVOICE/DOC #

553179 *

INVOICE/DOC DATE

01/19/00

Vendor's Name **ASCAP**

Vendor's Address **One Lincoln Plaza**

New York, NY 10023

Attn: Licensing Dept.

Fed ID No (SSN or EIN#)

Res./Non-Res. Alien (Y/N)

VENDOR'S CERTIFICATION

I hereby certify that items listed below are proper charges against CENTRAL MICHIGAN UNIVERSITY.

Vendor

By

Vendor must sign in ink.

ITEM #	QTY	UNIT	DESCRIPTION	UNIT PRICE	AMOUNT
			Web Site Music Agreement		264.00
			License Agreement for Internet		
<div style="border: 2px solid red; padding: 5px; display: inline-block;"> <p style="font-size: 2em; color: red; margin: 0;">PAID</p> <p style="color: red; margin: 0;">Processed by CJS</p> <p style="color: red; margin: 0;">Vendor # 552</p> <p style="color: red; margin: 0;">Date 1-20-00</p> <p style="color: red; margin: 0;">Doc # 19-713397</p> </div>					

VENDOR - DO NOT WRITE BELOW THIS LINE

264.00

I APPROVE THE ABOVE DESCRIBED FOR PAYMENT. ADDITIONAL SIGNATURES AS REQUIRED

DEPARTMENT COMPLETE

X

X

TOTAL

ORGANIZATION'S DIRECTOR

X *Thomas J. ...* 1/19/00

ACCOUNTING USE ONLY
DISCOUNT AMOUNT

ORG NAME	ORG. NO.	SUB-ACCT #	AMOUNT	DESCRIPTION/COMMENT	DISCOUNT AMOUNT
Acad Prog	24663	750700	264.00	ASCAP Internet License Agreement	0