

INVOICE

Please Make Checks Payable To:

**Portland Public Schools
Accounts Rec Finance Department
PO Box 3107
Portland OR 97208-3107**

Page: 1
Invoice No: CUB-025287
Invoice Date: 07/05/2012
Customer Number: 00022740
Payment Terms: On Receipt

DUE DATE: 07/05/2012

Bill To:

**Greater Portland Soccer District / GPSD
PO Box 271
Otis OR 97368-0271**

AMOUNT DUE:

\$ _____
Amount Remitted

For billing questions, please call 503-916-3268

Original Invoice: CUB-025283 07/05/2012
Prior Adjustment: CUB-025286 07/05/2012

Line	Adj	Description	Quantity	Unit Amt	Amount
Location of Facility Rented: Cleveland Billing for use of: turf field for adult soccer games held on sundays from 2-8pm Sept 9- Dec 2, 2012. Permit 307183. Invoice payment by Credit/Debit card: Name on Account _____ Credit card # _____ Credit Card Expiration Date _____ Billing Address _____ _____ I agree to pay all added costs incurred after issuance of the building use permit, associated with my use of the above facility. I give permission for Portland Public Schools to charge these added costs to the credit card provided. (Add'l charges: costs associated with extending the hours of use including add'l room rental, custodial time and/or faculty representation fees, damage to the facility or equip).Signature _____					
1		High School Field (Turf)			
2		Application Fee			
TOTAL AMOUNT DUE :					\$