



DISTRICT BUSINESS SERVICES ACCOUNTS PAYABLE EMERGENCY ADD-ON

BATCH#: _____

DISTRICT: _____

BEGINNING BATCH TOTAL	AMOUNT
\$	\$

VENDOR #	VENDOR NAME	ACCOUNT NUMBER	AMOUNT
			\$
EXPLANATION: _____			
			\$
EXPLANATION: _____			
			\$
EXPLANATION: _____			

NEW BATCH TOTAL	AMOUNT
\$	\$

APPROVED BY: _____
(MUST BE APPROVED BY A DISTRICT BUSINESS OFFICIAL)

DATE: _____

COUNTY OFFICE OF EDUCATION ONLY

DATE: _____

PROCESSED BY: _____

PLEASE COMPLETE AND EMAIL TO dbs-ft@cccoe.k12.ca.us