



INVOICE

Mammoth Unified School District P.O. Box 3509 Mammoth Lakes, CA 93546 Phone: 760-934-6802 Fax: 760-934-6803	DATE:	5/26/2026
	INVOICE #	26009
	For:	FLOCK Services
	Bill To:	Mammoth Hospital

All invoices due immediately of invoice date

Description	Amount
Mammoth Hospital Portion for FY25/26 per MOU	\$9,158.33
Sales Tax	\$0
Other	\$0
Total	\$9,158.33

For Billing questions, contact MUSD Business Department- Accounting Technician 760-934-6802 ext5102