

## SMA Refund Reimbursement Form:

Vendor ID: 101010101

Vendor Name: Delta Co

Street Address: 101 Maple Blvd

Unit 5B

Houston, TX 77001

**Invoice No.** INV004

Invoice Date July 06, 2025

Refund Amount \$ \$145.18

Distribution Coding 144.2899998.000000.00.00000.000.000

Description: Account Termination

<b>Original Invoice No. &amp; Amount</b>	ORI004	\$1,645.16
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<b>Pro-rated Invoice No. &amp; Amount</b>	PR004	\$1,499.98
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Preparer SMA Ops Billing Team

Approver Eric Spires

**Coupa Description:** Please add Watcher Group: AMRSPi