

WASTEWATER Accounts Payable Voucher

VOUCHER NO. 30629

WARRANT NO. 30629

DATE ALLOWED 02/10/14
Mo. Day Yr.

IN THE SUM OF \$38237.64

CITY OF BEECH GROVE

An invoice or bill to be properly itemized must show: kind of service, where performed, dates service rendered, by whom, rates per day, number of hours, rate per hour, number of units, price per unit, etc.

Payee

Table containing payee information: 314 REGIONS BANK C/O, REGIONS EQUIP. FINANCE CORP., P.O. BOX 11407, BIRMINGHAM AL 35246--100. Also includes terms: Date Due 02/10/14.

Vertical table with columns V # and W #, containing the number 30629.

Main invoice table with columns: INVOICE DATE, INVOICE NUMBER, APPROP NUMBER, PROJECT, PO NUMBER, DESCRIPTION (or note attached invoice(s) or bill(s)), AMOUNT. Rows include: 02/10/14 FEBRUARY 10 2014 607900384.000 SEWAGE/TRASH TRUCK LEASE/PRINCIPAL 35330.82; 02/10/14 FEBRUARY 10 2014 607900385.000 SEWAGE/TRASH TRUCK LEASE INTEREST 2906.82.

TOTAL 38237.64

Accounts Payable summary table: ACCOUNTS PAYABLE MUNICIPAL WASTEWATER UTILITY CITY OF BEECH GROVE. Favor Of REGIONS BANK C/O. Total Amount of Voucher \$ 38237.64. Deductions. Total Amount of Warrant \$ 38237.64. Month of.

Voucher Record table: VOUCHER RECORD, ACCT #. Rows include: Collection System, Pumping, Treatment & Disposal, Customer Accounts, Administrative & General, Reclaimed Water Treatment, Reclaimed Water Distribution, Total.

I hereby certify that the attached invoice(s), or bill(s), is (are) true and correct and that the materials or services itemized thereon for which charge is made were ordered and received except

Mo. Day Yr. Signature Officer/Title

I hereby certify that the attached invoice(s), or bill(s), is (are) true and correct and I have audited same in accordance with IC 5-11-10-1.6.

Mo. Day Yr. Signature Officer/Title

_____ Board/Council Members