

PLEASE ATTACH ALL INVOICES TO BACK OF VOUCHER

WARRANT NUMBER:

FILED:

VOUCHER

TETON COUNTY WYOMING, P.O. BOX 1727
JACKSON, WY 83001

VENDOR NAME: _____ VENDOR NUMBER: _____ (COUNTY CLERK WILL ASSIGN)

VENDOR ADDRESS: _____

DEPARTMENT: _____

BUDGET ACCOUNT NUMBER: _____ (ASSIGNED BY DEPT.)
(IF MULTIPLE ACCOUNTS, LIST BELOW)

DESCRIPTION OF CHARGE, PURCHASE, ETC. ATTACH INVOICES.

TOTAL

STATE OF WYOMING)
 ^{SS}
COUNTY OF TETON)

I certify, under penalty of perjury, that this voucher and the items included therein for payment are correct and just in all respect.

Dated _____, 20_____

Signature of Claimant

EO/DH APPROVAL _____

CLERK REVIEW _____