

ACCOUNTS PAYABLE VOUCHER

PLYMOUTH COMMUNITY SCHOOL CORPORATION - 611 BERKLEY ST. - PLYMOUTH, INDIANA 46563

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, rates per hour, number of units, price per unit, etc.

Payee	Purchase Order No. _____
_____	Terms _____
_____	Date Due _____
_____	_____

Invoice Date	Invoice Number	Description (or note attached invoice(s) or bill(s))	Amount
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	Title
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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.	Treasurer
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Mo. Day Yr.	Supervisor
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