

ACCOUNTS PAYABLE VOUCHER

WA-NEE COMMUNITY SCHOOLS - 1300 NORTH MAIN STREET - NAPPANEE, INDIANA 46550

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 <hr/> Vendor # <hr/> Wa-Nee Community Schools <hr/>	Purchase Order No. _____ Terms _____ Date Due _____
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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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