Prescribed by State Board of Accounts State Form No. 523 (Rev. 1995)

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 renderd,by whom, rates per day, number of hours, rates per hour, number of units, price per unit, etc.

	Payee			
	Vendor #		Purchase Order No.	
Wa-Nee Community Schools			Terms	
			Date Due	
Invoice Date	Invoice Number	(or note	Description attached invoice(s) or bill(s)	Amount
				Total
		ched invoice(s), or bill(s) is made were ordered an), is (are) true and correct and that nd received except	the materials or services
Mo. Day	Yr.		Signature	Title
	by certify that the atta with IC 5-11-10-1.6.	ched invoice(s), or bill(s)), is (are) true and correct and I hav	ve audited same in
Mo. Day	Yr.		Treasurer	

VOUCHER	WARRA	NT		
			PAYEE	
Cha	arge These Approp	riation	Vendor #	
Account	Account Name	Amount	Wa-Nee Community Schools	
Number	Account Name	Amount	1300 N. Main Street	
			Nappanee, IN 46550	
			We have examined the invoice(s) or bill(s) attached and are approving such invoice(s), bill(s) in the amount of	
			\$	
			APPROVED	
			Mo. Day Yr.	
			DOADD OF COURCE TRUCTERS	
	Total		BOARD OF SCHOOL TRUSTEES	