

BOARD OF COUNTY COMMISSIONERS

REGIONS BANK VOUCHER

PAYEE #: 164312

NAME OF PAYEE	F9; CBG65 B?
ADDRESS	PO BOX 11301
	BIRMINGHAM, AL 35202

Statement date:

Card # (last 4):

Dept. Issued Name:

Account Number	Job #	Amount	Vendor Name	Vendor Invoice No.

CARD TOTAL: _____

Goods and/or services per attached invoices have been received.

Approved by: _____ Department Head Approved by: _____ Clerk