

AP Entry Batch Proof

Batch ID: **OH176346**

Enter Date: Batch Status: BE User Total: 7,577.00

The undersigned, under penalty of perjury, states that the items on the attached claim are true and correct, that the amounts are properly due this claimant, and that no items have been previously paid. Furthermore, the articles or services specified in the attached claim were necessary, ordered for use by this department, and the articles or services have been delivered or performed as stated.

Authorized Signature: _____

Date: _____

Audited: _____

Distributed: _____

Paid: _____

User: LARSON,KARYN Batch Created By: LARSOKAR Date: 07/17/2023
Report: Batch Proof (Auditor) Time: 11:50:06

Inv Amt **7,577.00** 26300010 Jenny Lind Veterans 5201 Maint of Buildings/Grounds **JL:** Separate Check: Relate To:
Invoice Date: Invoice #: 2023-89.0 POLISH CNCRETE FLOORING Secondary Ref: PO#:
Vendor: **0042094** BILLINGS, ANDREW 601 W. VINE ST STOCKTON **CA** 95203 REFUND FY RETURN
Division Code: GEN Check Stock: AP Tax Code: Contract:

System Messages: Total **7,577.00**