

# ACCOUNTS PAYABLE VOUCHER

## GARY COMMUNITY SCHOOL CORPORATION, GARY, IN

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

Payee

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Purchase Order No. \_\_\_\_\_

Terms \_\_\_\_\_

Date Due \_\_\_\_\_

Invoice Date	Invoice No.	Description	Total
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
<b>TOTAL</b>			<b>\$ -</b>

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 \_\_\_\_\_

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 \_\_\_\_\_

Voucher No. \_\_\_\_\_ Warrant No. \_\_\_\_\_

Account Number	Account Name	Amount
<b>TOTAL</b>		<b>\$ -</b>

PAYEE

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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.

\_\_\_\_\_

\_\_\_\_\_

BOARD OF SCHOOL TRUSTEES