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| FORM A 19-1A (Rev. 5/91) |  STATE OF WASHINGTON INVOICE VOUCHER |
|---------------------------------------|--|

| AGENCY USE ONLY | | |
|-----------------|---------------|-------------------|
| AGENCY NO. | LOCATION CODE | P.R. OR AUTH. NO. |
| 2150 | | |


| AGENCY NAME |
|---|
| Utilities and Transportation Commission PO Box 47250 Olympia, Washington 98504-7250 |

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

| VENDOR OR CLAIMANT (Warrant is to be payable to) |
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| Washington Eastern Railroad, LLC 1027 S. Main St. Suite 403 Joplin, MO 64801 |
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Vendor's Certificate: I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion or Vietnam era or disabled veterans status.

| | | |
|----|--|-------------------------|
| BY |  (SIGN IN INK) | June 12, 2023 (DATE) |
| | Senior Vice President (TITLE) | |

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|---|------------------------------|
| FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For reporting Personal Services Contract Payments to I.R.S.) | DOCKET # TR-220654 |
|---|------------------------------|

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|-------------------------------------|-------------|
| Amount authorized (granted): | \$20,000.00 |
| Actual Cost of Project: | \$22,734.24 |
| Amount Requested for Reimbursement* | \$20,000.00 |

*Note: all expenditures must be itemized on a Expenditure Summary Report

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| COMMENTS |
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|------------------------------------|---|------|-----------------|------|
| PREPARED BY Kim Anderson | TELEPHONE NUMBER 360-664-1153 | DATE | AGENCY APPROVAL | DATE |
|------------------------------------|---|------|-----------------|------|

| | | | |
|------------|-------------------|------------------------------------|------------------------------|
| DOC. DATE: | CURRENT DOC. NO.: | REF DOCUMENT NUMBER: TR- | EXCEPTION CODE: 04 |
|------------|-------------------|------------------------------------|------------------------------|

| TRANS CODE | FUND | MASTER INDEX | | SUB OBJ | SUB SUB OBJECT | ORG INDEX | PROJECT | SUB PROJ | AMOUNT | INVOICE NUMBER |
|------------|------------|--------------|---------------|-----------|----------------|-------------|---------|----------|--------|----------------|
| | | APPN INDEX | PROGRAM INDEX | | | | | | | |
| 21 | 080 | 030 | 00514 | NZ | | 0210 | | | | TR- |
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|---------------------------------|------|---------------|----------------|
| ACCOUNTING APPROVAL FOR PAYMENT | DATE | WARRANT TOTAL | WARRANT NUMBER |
|---------------------------------|------|---------------|----------------|

EXPENDITURE SUMMARY

Grantee Name: WER Cheney-Spokane Rd., Cheney WA
DOT# 066316U MP 1.3

WUTC Docket #: TR-220654

Cost Information: *Itemize all expenditures below*

| Description | Date | Vendor/Employee | Check # | Amount |
|--------------------------------------|--------|-----------------|----------|------------------|
| Install Alstom PMD-4, Program | 6/5/23 | CDL Electric | | 16,771.60 |
| NBS, Narrow Band Shunt | 6/5/23 | CDL Electric | | 1,131.05 |
| Testing, Documentation, AIS Drawings | 6/5/23 | CDL Electric | | 1,800.00 |
| Required Sundries | 6/5/23 | CDL Electric | | 1,173.60 |
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| | | | SUBTOTAL | 20,876.25 |
| | | | TAX | 1,857.99 |
| GRAND TOTAL | | | | 22,734.24 |

Project Status
 Complete

