+STATE OF V	VASHINGTON	
k 19-24	VOUCHER	DISTRIBUTION
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VENDOR NAME AND ADDRESS	AGENCY NUMBER	LOCATION CODE			
IRELAND III O	2150	<u> </u>			
IRELAND, LLC 361 N. OLD PACIFIC HWY	AGENCY P.R. OR AUTH	DRIZATION NUMBER			
MYRTLE CREEK, OR 97457	AGENCY NAME AND	LOCATION			
	1300 S. EVERGREEN P.O. BOX 47250	UTILITIES AND TRANSP. COMM. 1300 S. EVERGREEN PK DRIVE S.W. P.O. BOX 47250 OLYMPIA, WA 98504-7250			
FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (FOR REPORTING PERSONAL SERVICES CONTRACT PAYMENTS TO I.R.S.)	RECEIVED BY	DATE RECEIVED			
	BUSINESS OFFICE				

JSE SPACE BELOW AS A WORKSHEET TO DEVELOP OR EXPLAIN THE GOODS OR SERVICES PURCHASED

STAPLE INVOICES ON BACK

REVENUE REFUND - Withdrew CC application

RECEPTION OR FIELD RECEIPT NO. 18338 DATED 4-27-09 \$275.00

TINA LEIPSK		PMT DUE DAJE CURRENT DOC. NO.			5/28/09 REF. DOC. NO.		VENDOR NUMBER VOD1		VENDOR MESSAGE			USE TAX	5284 UBI NUMBER			
REF DOC SUF	TRANS CODE	M O D	FUND	MASTER I APPN INDEX	INDEX PROGRAM INDEX	SU B OBJ	SUB SUB OBJECT	ORG INDEX	WORK CLASS ALLOC	COUNTY BUDGET UNIT	CITY/ TOWN MOS	PROJEC T	SUB PROJ	PROJ PHAS	AMOUNT	INVOICE NUMBER
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·CCO	UNTING A	APPRO	VAL FOI	R PAYME	NT	8 CA F13750				DATE					WARRANT TOTAL \$275.00	WARRANT NUMBER