

VENDOR NAME AND ADDRESS Titan Moving & Hauling, LLC 17747 2 nd Place NE Shoreline, WA 98155	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;">AGENCY NUMBER 2150</td> <td style="width:50%; padding: 2px;">LOCATION CODE</td> </tr> <tr> <td colspan="2" style="padding: 2px;">AGENCY P.R. OR AUTHORIZATION NUMBER REFUND</td> </tr> <tr> <td colspan="2" style="padding: 2px;">AGENCY NAME AND LOCATION UTILITIES AND TRANSP. COMM. 1300 S. EVERGREEN PK DRIVE S.W. P.O. BOX 47250 OLYMPIA, WA 98504-7250</td> </tr> </table>	AGENCY NUMBER 2150	LOCATION CODE	AGENCY P.R. OR AUTHORIZATION NUMBER REFUND		AGENCY NAME AND LOCATION UTILITIES AND TRANSP. COMM. 1300 S. EVERGREEN PK DRIVE S.W. P.O. BOX 47250 OLYMPIA, WA 98504-7250	
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USE SPACE BELOW AS A WORKSHEET TO DEVELOP OR EXPLAIN THE GOODS OR SERVICES PURCHASED

STAPLE INVOICES ON BACK

REVENUE REFUND – Carrier withdrawing HHG application due to not having vehicles.

RECEPTION OR FIELD RECEIPT NO. 33308 DATED 07/24/11

PREPARED BY Tina Leipski							TELEPHONE NUMBER 664-1170			DATE 09/22/11			AGENCY APPROVAL			DATE	
DOC. DATE		PMT DUE DATE		CURRENT DOC. NO.			REF. DOC. NO.			VENDOR NUMBER VOD1		VENDOR MESSAGE		USE TAX		UBI NUMBER	
REF DOC SUF	TRANS CODE	M O D	FUN D	MASTER INDEX APPN 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	
	198		111			02	68								\$550.00	REFUND	
ACCOUNTING APPROVAL FOR PAYMENT										DATE			WARRANT TOTAL \$550.00		WARRANT NUMBER		