

~~XXXXXXXXXX~~ TV-060721

VENDOR NAME AND ADDRESS DAVID J CAMPBELL 19830 SE 353RD STREET AUBURN, WA 98092	AGENCY NUMBER 2150	LOCATION CODE
FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (FOR REPORTING PERSONAL SERVICES CONTRACT PAYMENTS TO I.R.S.)		
RECEIVED BY BUSINESS OFFICE		DATE RECEIVED

USE SPACE BELOW AS A WORKSHEET TO DEVELOP OR EXPLAIN THE GOODS OR SERVICES PURCHASED STAPLE INVOICES ON BACK

REVENUE REFUND - DISMISSED HOUSEHOLD GOODS APPLICATION

RECEPTION OR FIELD RECEIPT NO. **0001934** **\$550.00** DATED **05/03/06**

PREPARED BY TINA LEIPSKI <i>[Signature]</i>		TELEPHONE NUMBER 664-1170	DATE 10-27-06	AGENCY APPROVAL <i>[Signature: Jeri Wallace]</i>	DATE 10/30/06											
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	FUND	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		WARRANT NUMBER	
													\$			