

VENDOR NAME AND ADDRESS ABDIRAHMAN MAHDI 3726 S. 180TH APT C204 SEATAC, WA 98188	AGENCY NUMBER	LOCATION CODE
	2150	
	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		
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 – Applicant withdrew Common Carrier application.

RECEPTION OR FIELD RECEIPT NO. 44403 DATED 3/25/13 \$275.00

PREPARED BY Tina Leipski <i>[Signature]</i>			TELEPHONE NUMBER 664-1170			DATE 4/12/13			AGENCY APPROVAL <i>[Signature]</i>			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	SUB 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								\$275.00	REFUND
ACCOUNTING APPROVAL FOR PAYMENT										DATE			WARRANT TOTAL \$275.00		WARRANT NUMBER	

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