


VENDOR NAME AND ADDRESS SATWANT SINGH DHILLON 5625 N SYCAMORE AVE FRESNO, CA 93723	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		
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 – Carrier applied for authority and is now withdrawing application.
 RECEPTION OR FIELD RECEIPT NO. 47541 DATED 11/6/13 \$275.00

PREPARED BY Tina Leipski		TELEPHONE NUMBER 664-1170		DATE 12/9/13	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 C	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								\$275.00	REFUND
ACCOUNTING APPROVAL FOR PAYMENT										DATE			WARRANT TOTAL \$275.00	WARRANT NUMBER		