

AGENCY VOUCHER NUMBER

STATE OF SOUTH CAROLINA
VOUCHER

COMPTROLLER GENERAL'S WARRANT NUMBER

599

CIRCLE IF SPECIAL TYPE

1. VENDOR TRAVEL
2. DESCRIPTIVE RECORD
3. LISTING ATTACHED

To THE COMPTROLLER GENERAL,

The attached bills are approved for payment as follows:

L32

AGENCY NO

State Housing Authority

AGENCY NAME

1/9/99

DATE

99

FY

Mid South Mortgage Co.

PAYEE

571122345

VENDOR NO / SOCIAL SECURITY NO

V

V/S

1099

I hereby certify that the articles purchased or services rendered as shown herein have been received and are in accordance with law and that the payee is entitled to payment therefore by the State of South Carolina.

P.O. Box 6492

STREET ADDRESS

VENDOR REFERENCE NO

C C D CODE

CITY COUNTY DISTRICT NAME

Betty Smith

SIGNATURE

1/9/99

DATE

Columbia

CITY

SC

STATE

29206

ZIP

\$ 95.28

AMOUNT

Finance Director

OFFICIAL TITLE

FM	TRANS CODE	MINI CODE	SUB FUND CODE	SUBSIDIARY ACCOUNT	ENCUMBRANCE NUMBER	D O D	PROJECT CODE	PH	AGENCY REFERENCE	OBJECT CODE	D E B I T	TRANSACTION AMOUNT	MULTI PURPOSE CODE	TRAVEL			C G R	CG USE ONLY
														S L R	NO MILES	NO TRIPS		
07	670	0672	4956							1501		95.28						
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		
11																		
TOTAL										1501		95.28	C G AUDITOR					

STARS FORM 60 10/1/80

TOTAL

1501

95.28

C G AUDITOR

TO PAYEE The attached check is in payment of (To be filled in by Department)

Mid South Mortgage Co.
Interest on Reserve \$95.28

DEPARTMENT Administration