

AGENCY VOUCHER NUMBER

STATE OF SOUTH CAROLINA VOUCHER

COMPTROLLER GENERAL'S WARRANT NUMBER

4683
<small>CIRCLE IF SPECIAL TYPE</small>
1. VENDOR TRAVEL
2. DESCRIPTIVE RECORD
3. LISTING ATTACHED

To THE COMPTROLLER GENERAL,

The attached bills are approved for payment as follows:

N12 Dept. of Juvenile Justice 1/9/99 99
AGENCY NO AGENCY NAME DATE FY

George M. Jones

259244619

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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 therefor by the State of South Carolina.

PAYEE VENDOR NO / SOCIAL SECURITY NO V/S FY
 1099

1620 Main Street

Joseph W. Smith 1/10/99

STREET ADDRESS VENDOR REFERENCE NO C C D CODE CITY COUNTY DISTRICT NAME SIGNATURE DATE

Beaufort SC 29902 **\$ 150.00** Finance Director
CITY STATE ZIP CHECK NUMBER AMOUNT OFFICIAL TITLE

FM	TRANS CODE	MINI CODE	SUB FUND CODE	SUBSIDIARY ACCOUNT	ENCUMBRANCE NUMBER	PROJECT CODE	PH	AGENCY REFERENCE	OBJECT CODE	TRANSACTION AMOUNT	MULTI PURPOSE CODE	TRAVEL			C G R	CG USE ONLY
												SOCIAL SECURITY NUMBER	TRAVELER'S LAST NAME	FI		
07	640	3255	1001						0413	150.00						
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																

STARS FORM 60 10/1/80

TOTAL

413

150.00

C G AUDITOR

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

George M. Jones
Rent \$150.00

DEPARTMENT Community Programs