AGENCY VOUCHER NUMBER

4162

CIRCLE IF SPECIAL TYPE
1. VENDOR TRAVEL
2. DESCRIPTIVE RECORD
3. LISTING ATTACHED

STATE OF SOUTH CAROLINA
VOUCHER

COMPTROLLER GENERAL'S WARRANT NUMBER

To THE COMPTROLLER GENERAL,

The attached bills are approved for payment as follows:

AGENCY NO: R36 | AGENCY NAME: Department of LLR | DATE: 12/9/99 | FY: 2000

PAYEE: Harold E. White | VENDOR NO / SOCIAL SECURITY NO: 251740553 | V/S: 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.

STREET ADDRESS: 1620 Third Street | VENDOR REFERENCE NO: | C C D CODE: | CITY COUNTY DISTRICT NAME:

SIGNATURE: Robert E. Lee | DATE: 12/9/99

CITY: Columbia, | STATE: SC | ZIP: 29209 | CHECK NUMBER: | AMOUNT: $ 413.60

OFFICIAL TITLE: Controller

	FM	TRANS CODE	MINI CODE	SUB FUND CODE	SUBSIDIARY ACCOUNT / SOCIAL SECURITY NUMBER	ENCUMBRANCE NUMBER	MOD / TRAVELER'S LAST NAME	PROJECT CODE	PH / FI	AGENCY REFERENCE / MI	OBJECT CODE	DETAIL	TRANSACTION AMOUNT	MULTI PURPOSE CODE	TRAVEL SLN	TRAVEL NO MILES	TRAVEL NO TRIPS	CGR	CG USE ONLY	
1	06	600	0864	1001		4162					0599		413.60		S					
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
										TOTAL	0599		413.60							

Agency Voucher Number must be entered in the Encumbrance No. column for Travel Advance..

STARS FORM 60 10/1/80

C G AUDITOR

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

Harold E. White
Travel Advance $413.60

DEPARTMENT Administration