

AGENCY NUMBER <b>1</b>	AGENCY BATCH NUMBER <b>2</b>	OBJECT CODE HASH TOTAL <b>3</b>	TOTAL BATCH AMOUNT <b>4</b>	BATCH DATE <b>5</b>	BATCH NUMBER <b>6</b>	FM <b>7</b>	DOCUMENT <b>35</b>
---------------------------	---------------------------------	------------------------------------	--------------------------------	------------------------	--------------------------	----------------	-----------------------

AGENCY VOUCHER NUMBER  
**9**

## STATE OF SOUTH CAROLINA

C.G. WARRANT NUMBER  
**33**

AGENCY TRANSFERRED TO (CR)  
NAME  
ADDRESS  
**10**

### JOURNAL VOUCHER

TO REQUESTING AGENCY:  
This form must be supported with documentation including the reason

AGENCY TRANSFERRED FROM (DR)  
NAME  
ADDRESS  
**11**

FROM:

FM	TRANS CODE	AGCY NO	MINI CODE	SUB-FUND CODE	SUB-SIDIARY ACCOUNT NO	ENCUMBRANCE NO	M O D	PROJECT CODE	P H A S E	AGENCY REFERENCE NUMBER	OBJECT CODE	D E T A I L	TRANSACTION AMOUNT	MULTI-PURPOSE CODE	C G R
<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>
TOTAL													<b>28</b>	<b>29</b>	

TO:

FM	TRANS CODE	AGCY NO	MINI CODE	SUB-FUND CODE	SUB-SIDIARY ACCOUNT NO	ENCUMBRANCE NO	M O D	PROJECT CODE	P H A S E	AGENCY REFERENCE NUMBER	OBJECT CODE	D E T A I L	TRANSACTION AMOUNT	MULTI-PURPOSE CODE	C G R
<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>
TOTAL													<b>28</b>	<b>29</b>	

REASON FOR ENTRY: **30**

REQUESTED BY: **31** DATE: **32** APPROVED BY: **34** DATE: **34**