

BILL LIST AMENDMENT

AUDIT MONTH TO BE AMENDED: December 2017

REQUESTING DEPARTMENT: Treasurer's Office

VENDOR NAME: Treasurer State of New Jersey

PURCHASE ORDER # _____ PURCHASE ORDER TOTAL \$ 1,000.00

LINE ACCOUNT NUMBER: 7-01-16-130-110-005

DESCRIPTION: Bail Refund

INVOICE AMOUNT \$ 1,000.00 PAYMENT REQUESTED \$ 1,000.00

REASON FOR AMENDMENT: Did Not Receive E-mail / Second Request
12/19/17

Macey M. Anderson 12/19/17
DEPARTMENT HEAD SIGNATURE DATE

APPROVED:
Chen B 12/19/17
ADMINISTRATOR DATE

ADMINISTRATOR PLEASE FORWARD APPROVED COPIES TO:

CLERK OF THE BOARD

TREASURER

TREASURER: _____

DATE OF CHECK ISSUED: _____ SIGNATURE _____

TREASURER PLEASE FORWARD COMPLETED COPIES TO:

PURCHASING (ACCOUNTS PAYABLE)
USING DEPARTMENT