



Purchase Order/Expense Voucher Form

Voucher No: _____
Purchase Order No:

Purchase Order

Expense Voucher

Vendor Name: Hyde-Stone Mechanical Contractors	Vendor Code:
Voucher Date: 12/18/18	Invoice Number: 90987
Address: 22962 Murrock Circle Watertown, NY, 13601	Invoice Date: 12/18/18 Due Date: UPON RECEIPT Ship to: SAME AS ADDRESS
Phone Number: 315-799-1200	
Vendor Terms: NET 30 DAYS	Bill to: SAME AS ADDRESS

Billable (Y/N).	Date	Item Description or Destination	Sub-Total	Amount
Y	12/21/18	CSS#16676, Hyde-Stone Invoice # 90987, CMI #1660		\$432.62
TAX:				\$34.61
(LESS) COMPANY CREDIT CARD:				
P.O. not to exceed:				
TOTAL:		(Due to Employee / Vendor)		\$467.23

Steve Miller 511014 12/21/18

Voucher Completed by: _____ Employee No. _____ Date _____

Supervisor Signature: _____ Employee No. _____ Date _____

Program Manager/Assistant Program Manager Signature: _____ Employee No. _____ Date _____

Vice President, Administration Signature: _____ Employee No. _____ Date _____