DRUG COURT –VOUCHER CASH BOOK (SA&I 2162DC)

S. A. & I. 258 (2002)

COUNTY OFFICIAL DEPOSITORY

_____ NAME OF OFFICER

_____ OFFICIAL TITLE

In Account With

MADE IN DUPLICATE

DELIVER TO DEPOSITOR

Please examine at once, If no error is reported within 10 days, the account will be considered correct.

Statement for Month of

Monthly Report by Treasurer to Depositors _____ , 20___

DEPOSITS			A VOUCHERS REGISTERED FOR PAYMENT						
DATE	AMOUNT		YOUR NUMBER	AMOUNT		X	YOUR NUMBER	AMOUNT	
SUMMARY									
Balance at Close of last Month's Business									
Deposits this Month									
Canceled Vouchers									
TOTAL									
Total Vouchers Registered List Attached									
Balance Close of This Month									