

S.A. & I. 1293(2000)

_____ CASH FUND
P.O. No. _____ ACCT. No. _____
Dept. of _____
Purpose _____

Total Amount Allowed \$ _____
State tax _____
Fed. tax _____
Soc. Sec. _____
Medicare _____
Retirement _____
Insurance _____

Net Amount of Warrant \$ _____
Warrant registered _____ 20
Funds are _____ available to pay same.

County Treasurer

Deputy

Office of _____ County of _____
County Clerk _____ State of Oklahoma

Series _____ Okla. _____ 20 _____

To The _____
County Treasurer _____

Pay To _____
The Order Of, _____

_____ Dollars

Attest: I, truly certify that the purpose stated is, in summary, as disclosed on the face of the claim and that the amount thereof is within the sum available thereof.

(seal)

County Clerk

Deputy

Out of the _____ CASH FUND

BY ORDER OF
BOARD OF COUNTY COMMISSIONERS

Chairman

PRIN. \$ _____
INT. \$ _____
TOTAL \$ _____

Payment No. _____

Warrant No. _____