ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,

ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6

July 6, 2012

JUDITH C. RHODES
FISCAL OFFICER

WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE VOUCHER REGISTER, CONSISTING OF

PAGES, AND EXCEPT FOR VOUCHERS NOT ALLOWED AS SHOWN ON THE REGISTER SUCH VOUCHERS ARE HEREBY ALLOWED

IN THE TOTAL AMOUNT OF $115.50 DATED THIS 6th DAY OF July 2012.

APPROVED BY STATE BOARD OF ACCOUNTS IN 2001 FOR CITY OF WEST LAFAYETTE

CITY OF WEST LAFAYETTE

FOR THE PERIOD OF 7/06/12 - 7/06/12

CHECK VOUCHER VENDOR NAME PO # INVOICE NUMBER	DESCRIPTION	DUE DATE FND	PROGRAM OBJECT	CC	ACCOUNT TITLE	VOUCHER AMOUNT	AMOUNT ALLOWED
47530 47530 CITY OF WEST LAFAYETTE		7/06/12					
TEMP LOAN	FROM FUND 811 TO 814	811	.00 970.00	0	FLEX PLAN MEDICAL: TEMP LOAN	13.00	13.00
TEMP LOAN	FROM FUND 811 TO 815	811	.00 970.00	0	FLEX PLAN MEDICAL: TEMP LOAN	2.50	2.50
TEMP LOAN	FROM FUND 811 TO 852	811	.00 970.00	0	FLEX PLAN MEDICAL: TEMP LOAN	20.00	20.00
TEMP LOAN	FROM FUND 811 TO 856	811	.00 970.00	0	FLEX PLAN MEDICAL: TEMP LOAN	80.00	80.00
					CHECK AMOUNT	115.50	
			NEW VOUCHERS TOTAL			115.50	
					GRAND TOTAL.....	115.50	

CITY OF WEST LAFAYETTE

FUND	DESCRIPTION	VOUCHER TOTAL
811	FLEXIBLE PLAN MEDICAL	115.50
	GRAND TOTAL	115.50