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| FORM |  | STATE OF WASHINGTON |  | AGENCY USE ONLY |
| **A19-1A** |  |  |  | AGENCY NO. | CONTRACT NO. OR GA AUTH. NO. |
|  |  | **INVOICE VOUCHER** |  |  |       |

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| **AGENCY NAME** |  | ***INSTRUCTIONS TO VENDOR OR CLAIMANT:*** |
| Washington Association of Sheriffs and Police Chiefs3060 Willamette Dr. NE #200Lacey, WA 98516ATTN: Traffic Safety Grants |  | Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item. **Vendor’s Certificate:**I herebycertify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise orservices furnished |
| **VENDOR OR CLAIMANT (warrant is to be payable to)** |  | to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because |
|  |  | of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veteran status.By: |
|  |  | (Sign in ink)**NOTE: MUST CONTAIN ACTUAL SIGNATURE** |
| ATTN:  |  |  |
|  |  |  (Title) (Date) |

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| FEDERAL I.D. NO. OR SOCIAL SECURITY NO. | RECEIVED BY | DATE RECEIVED |
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| **DATE** | **DESCRIPTION** | **QUANTITY** | **UNIT PRICE** | **AMOUNT** |
|  | Radar/LIDAR (CFDA 20.600) |  |  |  |
|  | **FST (CFDA 20.608)** |  |  |  |
|  | SECTOR Printer/Scanner (CFDA 20.600) |  |  |  |
|  |  |  |  |  |
|  | PLEASE NOTE DATE EQUIPMENT RCVD:\_\_\_\_\_\_\_\_\_\_\_ CANNOT PROCESS REIMBURSEMENT WITHOUT THIS DATE |  |  |  |
|  |  |  |  |  |
|  | 2021 WASPC Traffic Safety Equipment Grant | Total:  |  |  |
|  | WASPC ACCOUNTING: 120-6200-00 |  |  |  |
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| PREPARED BY | TELEPHONE NUMBER      | DATE | AGENCY APPROVAL | DATE      |
| DOC DATE |  |  | CURRENT DOC NO |  | REF DOC NO |  | VENDOR NUMBER | VENDOR MESSAGE |
|       |  |  |  |       |  |  |       |  |  |       |  |  |  |
|  |  | M |  |  |  |  | SUB |  |  |  |  |  |  |
|  | TRANS | O |  | APPN | PROGRAM  | SUB | SUB |  |  |  |  | INVOICE | GENERAL |
| SUF | CODE | D | FUND | INDEX | INDEX | OBJ | OBJ | CNTY | CITY | PROJECT | AMOUNT | NUMBER | LEDGER |
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| ACCOUNTING APPROVAL FOR PAYMENT |  |  | DATE      |  |  | WARRANT TOTAL |  |  |