

Direct Payment Voucher

Rio Arriba County
PO Box 127
Tierra Amarilla, NM 87575

Date:			
Vendor #:			
Vendor Name:			
Invoice No #	Invoice Date	Expenditure Account Code	Amount
		TOTAL PAYMENT	\$ -
Payee Sign Here I certify that the above bill is correct and just and that payment therefore is due.		Signature-Payee	
Certification I certify that the above articles were received in good condition after due inspection, thereof, or the services were rendered as started; that they are necessary and proper and that the amounts claimed are just reasonable and that no part thereof has been paid.		Signature-Submitting Department	
		Signature-Authorization	
COMMENTS/REASONS:			