FORM
A19-1A-HW

(Rev. 1/91)

STATE OF
WASHINGTON

INVOICE VOUCHER

Online Help
This document is a protected form for use online. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

AGENCY USE ONLY

AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.
4610		

AGENCY NAME

Department of Ecology
Hazardous Waste & Toxics Reduction Program
PO Box 47659
Olympia WA 98504-7659

VENDOR OR CLAIMANT (Warrant is to be payable to)

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Sign below and send a copy of this invoice to the Department of Ecology. When the number of mercury switches has been confirmed by Environmental Quality the invoice will be processed for payment.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished 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 veterans status.

BY _____
(SIGN IN INK)

(TITLE) (DATE)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.	RECEIVED BY	DATE RECEIVED

DATE	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT	FOR AGENCY USE
	Automotive Mercury Light Switches			$3.00		
	Mercury Airbag Sensors			$3.00		
	ABS Switches			$9.00		
	Date switches picked up by UPS (/ /)					
	. Note: The quantity of switches will					
	. be confirmed by Environmental Quality					
	It is not necessary to count the switches					

PREPARED BY	TELEPHONE NUMBER	DATE	AGENCY APPROVAL	DATE

DOC DATE	PMT DUE DATE	CURRENT DOC. NO.	REF. DOC. NO.	VENDOR NUMBER	VENDOR MESSAGE	USE TAX	UBI NUMBER

				MASTER INDEX					WORKCLASS	COUNTY	CITY/ TOWN					
REF DOC SUF	TRANS CODE	MOD	FUND	APPN INDEX	PROGRAM INDEX	SUB OBJ	SUB SUB OBJECT	ORG INDEX	ALLOC	BUDGET UNIT	MOS	PROJECT	SUB PROJ	PROJ PHAS	AMOUNT	INVOICE NUMBER

ACCOUNTING APPROVAL FOR PAYMENT	DATE	WARRANT TOTAL	WARRANT NUMBER

Contact: Department of Ecology, Jeffrey Gutschmidt (425) 649 – 7280, Fax (425) 649-7218
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