Erie County Department of Social Services Erie County Office Building Room 426 / Accounting 95 Franklin Street Buffalo, NY United States 14202

Standard Form 1034 Revised Otober 1987 Department of the Treasury 1 TFM 4-2000 1034-121				PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL					VOUCHER NUMBER			
									2			
U.S. DEP	ARTMENT, BU	REAU, OR	ESTABLISHMI	ENT AND LOCATION	DATE VOUCHER PREPARED				SCHEDULE NO.			
				f Social Services	04-JUN-08				PAID BY			
			fice Buildin	ng	CONTRACT NUMBER AND DATE TBD				PAID BY			
		426 / Ac 1klin Str			REQUISITION NUMBER AND DATE							
	Buffalo	o, NY Uı	nited States	14202								
									DATE IN	VOICE DECEIVED		
PAYEE'S				THE RESEARCH FOUNDAT	TION OF		I			DATE INVOICE RECEIVED		
NAME AND ADDRESS				STATE UNIVERSITY OF N	EW YORK					DISCOUNT TERMS		
				P.O. BOX 9 ALBANY, NY 12201-0009					PAYEE'S ACCOUNT NUMBER			
			1	ATTN: CASH RECEIPTS DE	EPARTMENT							
				ТО	WEIGH	WEIGHT			45048 GOVERNMENT B/L NUMBER			
							3072					
NUMBER AND DATE OF			TE OF	ARTICLES OR SERVICES			U	NIT PRICE		AMO	UNT	
NUMBER AND DATE OF ORDER		DELIV	VERY OR RVICE	(Enter description, Item number of contract or Federal supply school deemed necessary)	edule, and other information	QUAN-TIT Y	COST	PE	ER		(1)	
				REQUESTED REIMBURSEMENT FOR T	HE PERIOD OF :							
				01-FEB-08 - 30-APR-08							\$51,010.50	
(Use continuation sheet(s) if necessary)				(Payee must NOT us		,			OTAL		\$51,010.50	
PAYMEN	IT: PROVISIONAL COMPLETE		APPROVED	FOR EXCHA!	NGE RATE	DIFFERENCES						
			PAYMEN	NT ONLY = \$	= \$1.00							
PARTIAL FINAL			BY ²									
						Amount verified; correct for						
	PROGRESS ADVANCE		THE E									
			HILE	TITLE (Signature or initials)								
D		athority vested in me, I certify that this voucher is correct and proper for payment.										
Pursuant t	o authority veste	ed in me, i ce	erury mat mis vo	outner is correct and proper for payment.								
(Date) (Authorized Certifying Officer) ²									(Title)			
				ACCOUNTI	NG INFORMATION							
	CHECK NUMBER			ON ACCOUNT OF U.S. TREASURY CHI		CK NUMBER			ON (Name of bank)			
BY							ar words			,		
PAID BY	CASH			DATE	PAYEE 3							
					1 nor 1			PER				
1 2		-	rrency, insert nar	me of currency. brove are combining in one person, one signature only is necessary; of	otherwise the							
3	approving offi	cer will sign	in the space pro	ovided, over his official title.				TITLI				
				of a company or corporation, the name of the person writing the comp For example: "John Doe Company, per John Smith, "Secretary", or "I					5			
Previous edit	ion usable										NSN 7540-00-900-2234	