

To: Accounting

Fax: 995-4340

# LAKE COUNTY DEPARTMENT OF SOCIAL SERVICES

## EXPENDITURE REQUEST

Qty	Description	Item #	Price	Extended
1	Southwest Flight - <del>Dallas, TX</del> <i>Portland, Oregon</i>	<i>114</i>	\$547.96	\$547.96
	Client Contact - Sandra Miller		\$547.96	\$547.96
	2/2/2018			\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
Sub-Total:				\$1,095.92
Non-Taxable Labor:				
Shipping:				
Tax @:				\$0.00
Total:				\$1,095.92

Vendor Name: Amber Davis / Cal Card

Tax ID#: \_\_\_\_\_

Requested By: Morgan HunterDate: 5/29/18

Supervisor

Approval By: Amber DavisDate: 5/29/18

Director

Approval By: Crystal Markytan

Date: \_\_\_\_\_

*Only required for requests over \$500.00*

\*\*\*\*\*For Accounting Use Only\*\*\*\*\*

Fiscal

Approval By: \_\_\_\_\_

Date: \_\_\_\_\_

Dept #	Account #	Prog Code	Sub Acct	Amount	Key #

APD#