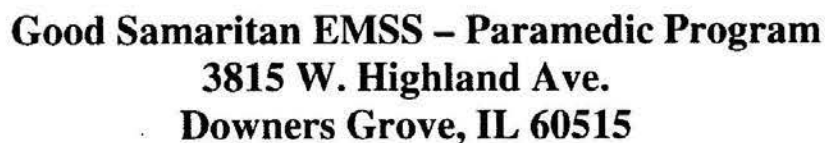


Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1035933
Vendor Name: Good Samaritan EMSS - Paramedi
Invoice Number: 100718
Invoice Date: 10/07/18
PO Number: B0358957
Check Number: E0069967
Check Amount: \$ 25,024.00
Check Date: 10/24/2018
Department ID: 00181
Reviewer Name:
Voucher Number: V0535045
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

**INVOICE DATE: 10/7/2018**

PAYABLE To:
Good Samaritan EMSS – Paramedic Program
Vendor# 1035933
ACH

[illegible]

OK to Pay
10/11/2018
Marianne Humm
Daniel Krakore
10/15/18
Marianne Humm
G# 01-10-00181-5308001