Warrant# _____

Vendor# _____ **Claim of:** _____

Address

vs: Winnebago County

Amount _____ Fund # _____

_____ _____

_____ _____

_____ _____

☐ This is an Accrued Expenditure (July & August)

Approval: Department head or Designee

_____

_____

_____

Filed: **Paid:**

Miscellaneous claim information

_____

_____

_____