

CLAIM FORM

On Account of Appropriation for: _____

To: _____

Address: _____

A claim to be properly itemized, must show: Kind of service, where performed, dates service rendered, by whom, rate per day, number of hours, rate per hour, price per foot, per yard, per hundred, per pound, per ton, etc.

Date	Order No.	Itemized Claim	Dollars	Cents
Claim Total:				

Pursuant to the provisions and penalties of Chapter 155, Acts of 1953.

I hereby certify that the foregoing is just and correct, that the amount claimed is legally due, after allowing all just credits, and that no part of the same has been paid.

Date

Signature of Claimant

Title