

STATE OF SOUTH DAKOTA VOUCHER

NON-CASH

CASH TRANSFER

EXPEND CORR

REVENUE CORR

CASH RECEIPT

DIRECT

XXX

AGENCY ENTRY INFORMATION

APPLICATION: DOCUMENT: DATE: 09/23/2011 VENDOR #:
 AREA: 74 ID NUMBER: CONTRACT #:

TO: (Payee, Billed Agency)
 Damon Brooks Associates
 1601 Holly Avenue
 Oxnard Shores, CA 83036

FROM: (Department, Billing Agency)
 Department of Human Services
 East Highway 34
 Hillsvieview Plaza
 % 500 E. Capitol
 Pierre, SD 57501-5070

FUNDING INFORMATION

Line Number	Company	Account Required	Center Required	Center User	Amount Each Line	Code
1	1000	520445001	1950114	142	\$42.60	DR
2	2003	520445001	1950114	142	\$157.40	DR
3						
4						
5						
6						
7						
8						
9						
10						
Total					\$200.00	

Description / Justification

Description of Services	Period of Services	Payment Amount
Disability Books	Sep-11	\$200.00
Total		\$200.00

STATE OF SOUTH DAKOTA VOUCHER

NON-CASH

CASH TRANSFER

EXPEND CORR

REVENUE CORR

CASH RECEIPT

DIRECT

XXX

AGENCY ENTRY INFORMATION

APPLICATION:
AREA: 74

DOCUMENT:
ID NUMBER:

DATE: 09/23/2011

VENDOR #:
CONTRACT #:

TO: (Payee, Billed Agency)
DiscountMugs
12610 NW 115th ave
Medley, FL 333178

FROM: (Department, Billing Agency)
Department of Human Services
East Highway 34
Hillsview Plaza
% 500 E. Capitol
Pierre, SD 57501-5070

FUNDING INFORMATION

Line Number	Company	Account Required	Center Required	Center User	Amount Each Line	Code
1	2000	52R441009	1950111	142	\$779.00	DR
2	2000	52R441009	1950112	142	\$779.00	DR
3	2000	52R441009	1950113	142	\$779.00	DR
4	2000	52R441009	1950114	142	\$779.00	DR
5	2000	52R441009	1950115	142	\$779.00	DR
6						
7						
8						
9						
10						
Total					\$3,895.00	

Description / Justification

Description of Services	Period of Services	Payment Amount
Pens for marketing to Employers/consumers	Sep-11	\$3,895.00
Total		\$3,895.00