

DuPage County  
**PAYMENT VOUCHER**  
 Effective December 1, 2023

Invoice No. \_\_\_\_\_  
 Vendor No. \_\_\_\_\_  
 Process Level \_\_\_\_\_  
 Amount \$267.72

**Reason to Return Check to:** \_\_\_\_\_

- |  |   |
|--|---|
| <input type="checkbox"/> Real Estate Closings<br><input type="checkbox"/> Vehicle Title Applications/Renewals<br><input type="checkbox"/> Vital Records<br>(includes background checks/fingerprinting) | <input type="checkbox"/> Certification/Licensing<br><input type="checkbox"/> Taxes/Unemployment<br><input type="checkbox"/> Insurance Settlements<br><input type="checkbox"/> Waiver of Lien<br><input type="checkbox"/> Subpoena Delivered Witness Fee |
|--|---|

Description: Nurses Week Supplies 2026

Please check one of the following:    **Budget is available for this purchase**    **Budget transfer is in process**

Remit to: [REDACTED]  
 Address/Zip: [REDACTED]

COMPANY	AU	ACCT	SUB	ACTV	ACTV CAT	DESCRIPTION (27 character length maximum)	AMOUNT
1200	2050	52200				Nurses Week Supplies 2026 - Amazon	\$58.55
1200	2050	52210				Nurses Week Supplies 2026 - Sam's club	\$112.68
1200	2050	52200				Nurses Week Supplies 2026 - Amazon	\$96.49
<b>TOTAL AMOUNT</b>							<b>\$267.72</b>

**CLAIMANT STATEMENT**

I, [REDACTED]  
Claimant

state that the amounts claimed herein are presented accurately; that the services were rendered, or articles were furnished, as therein charged and that the amount claimed, to the sum of \*\*\* \$267.72 dollars, is due and unpaid after allowing all just credits.

4/30/26  
Date

[REDACTED]

All requests for employee reimbursement must be provided to the Finance Department, entered into the accounts payable system and approved by the Office or Department not more than **sixty (60) days** after the expense has been incurred.

**Received  
 Nursing Admin.  
 MAY 05 2026**