

PAYEE:

NAME Lori Rathjen  
 ADDRESS 7326 132nd Circle  
 City/State Savage, MN 55378-1295  
 VENDOR # \_\_\_\_\_ WARRANT TYPE C

FUND 77-LMRWD  
 1099 \_\_\_\_\_  
 SERVICE DATE 2020  
 CONTRACT # \_\_\_\_\_  
 CONTRACT BALANCE AMOUNT \_\_\_\_\_  
 CAPITAL ASSET APPROVAL DATE \_\_\_\_\_

DECLARATION: I declare under the penalties of law (MS 471.391) that this account claim or demand is just and correct and that no part of it has been paid, and adheres to County policy and procedures.

The attached invoice has been verified for goods received or services performed

AUTHORIZED SIGNATURE Linda Loomis DATE 7/30/2020

INVOICE #	FUND #	DEPT #	PROG	ACTIVITY	ACCOUNT #	DESCRIPTION	AMOUNT
2019 CS-2	77	702		0114	6260	reimbursement for prairie restoration	\$1,327.08
<b>TOTAL</b>							<b>\$1,327.08</b>

Presented to the County Board on \_\_\_\_\_, 20\_\_ and \$ \_\_\_\_\_ allowed \_\_\_\_\_  
 Chairman County Board

Approved for Disbursement \_\_\_\_\_  
 Date \_\_\_\_\_ Initials \_\_\_\_\_