

Invoice Voucher

Remit To: State Auditor's Office
PO Box 40021
Olympia, WA 98504-0021
Federal ID No. 91-6001098



Page: 1 of 1
Invoice No.: L164237
Invoice Date: 11/12/2024
MCAG No.: 0498
County: Lewis

City of Toledo
PO Box 236
Toledo, WA 98591

Now accepting electronic payments
Send to: Washington State Auditor's Office
Routing: 123000848 Account: 153911801147
Account type: Checking
Please include invoice number

(Return this portion with your payment)

State Auditor's Office

(Detach and retain for your records)

Entity Name: City of Toledo
Invoice No.: L164237
Invoice Date: 11/12/2024

Audit No.: 53899

Audit Period: 22 - 23

Purchase Order:

| Month/Year | Work Performed | Bill Rate | Hrs | Amount | Travel/Other Expenses | Total |
|------------|----------------------|-----------|-------|-------------|-----------------------|-------------|
| 10/24 | Accountability Audit | \$139.10 | 82.0 | \$11,406.20 | \$0.00 | \$11,406.20 |
| 10/24 | Financial Audit | \$139.10 | 40.0 | \$5,564.00 | \$0.00 | \$5,564.00 |
| Sub Total: | | | 122.0 | \$16,970.20 | \$0.00 | \$16,970.20 |

Total Due This Invoice:
(Hrs rounded to nearest tenth)

122.0 \$16,970.20 \$0.00 \$16,970.20

JV Number: 250382

**FULL PAYMENT DUE
IN 30 DAYS**

I hereby certify the amount listed herein is a
proper charge for services rendered:

Charleen A. Patten

By: Charleen A. Patten, Financial Services Operations Manager

For questions, please call (564) 999-0892 or (564) 999-0941 fax (360) 586-3105 or e-mail billing@sao.wa.gov