

# STATE OF TEXAS

## Purchase Voucher (Shaded Areas Not Used by DADS)

Page 1 of \_\_\_\_\_

1. Agency No.		2. Agency Name				3. Current Document No.				<b>Accounting Use Only</b>			
4. Texas Identification Number (14 digits)				5. PDT		6. Document Amount							
7. Payee Name/Address						8. Agency Use							

  

<b>SFX 001</b>	9.	Ref Doc	SFX	Confid.	TC	Orig. Payment Date	PCA	AY	COBJ	Account	Amount	R
		APPN	Fund	Invoice Received Date		Delivery Date	Payment Due Date		Requested Payment Date		Interest Control	Reason
	Invoice No.			Description				MM/YY of Ser.		Dept ID	Program	SpeedChart

  

<b>SFX 001</b>	9.	Ref Doc	SFX	Confid.	TC	Orig. Payment Date	PCA	AY	COBJ	Account	Amount	R
		APPN	Fund	Invoice Received Date		Delivery Date	Payment Due Date		Requested Payment Date		Interest Control	Reason
	Invoice No.			Description				MM/YY of Ser.		Dept ID	Program	SpeedChart

  

<b>SFX 001</b>	9.	Ref Doc	SFX	Confid.	TC	Orig. Payment Date	PCA	AY	COBJ	Account	Amount	R
		APPN	Fund	Invoice Received Date		Delivery Date	Payment Due Date		Requested Payment Date		Interest Control	Reason
	Invoice No.			Description				MM/YY of Ser.		Dept ID	Program	SpeedChart

  

10. SER/DEL Date	11. Description of Goods or Services	12. Quantity	13. Unit Price	14. Amount	
	11a. HCATS Contract No.				11b. HCATS Service Dates

  

Verification Certification		Telephone (Area Code and No.)	Approval
15. Contact Name		Telephone (Area Code and No.)	16. Entered By

  

17. I approved this voucher for payment. The above goods or services correspond in every particular with the contract under which they were purchased. The invoice for the goods or services is correct. This payment complies with the General Appropriations Act.			
Approved		Mail Code	Telephone (Area Code and No.)
Approved		Mail Code	Telephone (Area Code and No.)

**Distribution:** Send original and one copy to Accounts Payable, Mail Code E-411.