

Standard Form 1034 Revised January 1980 Department of the Treasury I TFRM 4-2000	PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL	VOUCHER NO.
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U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION	DATE VOUCHER PREPARED	SCHEDULE NO.
	CONTRACT NUMBER AND DATE	PAID BY
	REQUISITION NUMBER AND DATE	

PAYEE'S NAME AND ADDRESS	<div style="border: 1px solid black; width: 100%; height: 100%; margin: 0 auto;"> <div style="border: 1px solid black; width: 80%; height: 80%; margin: 0 auto; position: relative;"> <div style="position: absolute; top: 0; right: 0; border: 1px solid black; width: 10px; height: 10px;"></div> <div style="position: absolute; bottom: 0; left: 0; border: 1px solid black; width: 10px; height: 10px;"></div> </div> </div>	DATE INVOICE RECEIVED	
	DISCOUNT TERMS		
	PAYEE'S ACCOUNT NUMBER		
	SHIPPED FROM	TO	WEIGHT

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	

(Use continuation sheet(s) if necessary) **(Payee must NOT use the space below)** **TOTAL**

PAYMENT: <input type="checkbox"/> PROVISIONAL <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR: = \$ _____	EXCHANGE RATE = \$1.00	DIFFERENCES _____
	BY² _____		Amount verified; correct for _____
	TITLE _____		<i>(Signature or initials)</i> _____
	Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.		

 (Date) (Authorized Certifying Officer)² (Title)

ACCOUNTING CLASSIFICATION

P A B I D	CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE ³	
	\$			

¹ When stated in foreign currency, insert name of currency.
² If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the space provided, over his official title.
³ When a voucher is received in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be.

PRIVACY ACT STATEMENT
 The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid.

Failure
to furnish this information will hinder discharge of the payment obligation.

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	CONTRACT NUMBER AND DATE	PAID BY				
	REQUISITION NUMBER AND DATE					
PAYEE'S NAME AND ADDRESS		DATE INVOICE RECEIVED				
		DISCOUNT TERMS				
		PAYEE'S ACCOUNT NUMBER				
SHIPPED FROM	TO	WEIGHT				
		GOVERNMENT B/L NUMBER				
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
<small>(Use continuation sheet(s) if necessary)</small>						TOTAL
PAYMENT: <input type="checkbox"/> PROVISIONAL <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR: =\$	EXCHANGE RATE =\$1.00	DIFFERENCES			
	BY²					
	TITLE		Amount verified; correct for (Signature or initials)			
MEMORANDUM						
ACCOUNTING CLASSIFICATION						
P A B I Y D	CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER	ON (Name of bank)		
	CASH	DATE	PAYEE ³			
	\$					

1034-219

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	CONTRACT NUMBER AND DATE	PAID BY				
	REQUISITION NUMBER AND DATE					
PAYEE'S NAME AND ADDRESS		DATE INVOICE RECEIVED				
		DISCOUNT TERMS				
		PAYEE'S ACCOUNT NUMBER				
SHIPPED FROM	TO	WEIGHT				
GOVERNMENT B/L NUMBER						
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>	QUANTITY	UNIT PRICE		AMOUNT (1)
				COST	PER	
(Use continuation sheet(s) if necessary)						TOTAL
PAYMENT: <input type="checkbox"/> PROVISIONAL <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR: = \$	EXCHANGE RATE = \$1.00	DIFFERENCES			
	BY²		Amount verified; correct for			
	TITLE		<i>(Signature or initials)</i>			
MEMORANDUM						
ACCOUNTING CLASSIFICATION						
P A B I Y D	CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER	ON <i>(Name of bank)</i>		
	CASH	DATE	PAYEE ³			
	\$					

1034-219

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