FORM - 2	DALLAS COUNTY							INVOICE NO:			
	REQUEST FOR PAYMENT							_			
MISCELLANEOUS											
<u> </u>						D	<u> 4TE:</u>			1	
ADDRESS:											
	CATEGORY										
<u>PURCHASE</u>											
<u>ORDER</u>	* 2023 Mileage Rate - \$0.655 *										
DATE	DESCRIPTION/BUSINESS PURPOSE							QTY	UNIT PRICE	TOTAL	
							_				
MUST BE ITEMIZED									TOTAL		
LINE NUMBER	COMPANY	FUND	COST CENTE		ACCOUNT	FUNCTIO	N	FUTURE (DEFAULT)	GRANT / PROJECT NUMBER		
<u>1</u>								0000			
<u>2</u>								0000			
<u>3</u>					_		\sqcap	0000			
<u>4</u>							\neg	0000			
<u>5</u>							一	0000			
<u>6</u>							ヿ	0000			
NON-COMPLIANT?											
REQUESTED BY:											
repres are es bu Count full					tify that charges sented by this b sential to Coun	/// ·		(PRINT NAME)			
					siness and the y has received t benefit thereof cept as noted.	APPROVED BY:	APPROVED BY: (SIGNATURE) (PRINT NAME)				
								(SIGNATURE)			