Attach supporting documentation to the back of this form

STATE OF IOWA

Item#	(51)		
Date: _	8	2	0	JL	_

	BUD	GET F	Ϋ́		(Seneral Accounting Expenditure DOCUMENT NUMBER											BER		
	2	024		DATE ACCTG PERIOD (mm/yy) 8/12/2024									2						
	VENDOR CODE										AGENCY NAME								
1209	of Neva 9 6th Str ada, IA	da eet	R NAME AN	ID ADDRE	SS		200 E		nic Dev d Ave.	RESS (ORDER) Velopment	S	SHIP TO ADDRESS							
		TERM	5	***************************************		FOB				URDER A	PPROVED B	Ÿ			GUOI	DS RECEIVEDA PERFORME		CES	
	QL	JANTITY								VENDOR'S IN	VOICE NUM	BER			DATE	INITITA	LS		
OR	DERED	REC	CEIVED		IIT OF ASURE						_			UNIT PRICE		TOTAL	PRICE	E	
BUSIN	IESS UNDE	R THE AU	CLA S FOR WHI THORITY O AND NO PA	CH PAYME F THE LA	ENT IS CLA W AND TH	RTIFIC NAMES WEFAT THE CH	ATION ATION SEE FURNISS ARGES AF	mber	er: 20	t under D-CVN-C 2	1 CERTIFY CORRECT	Project DOC AG	ENC' OVE EXP	FROM THE FU	ICA NCURR	1	18,36 MOUN	65.00	
DAT	//				TITLE		IOY		-					TION(S)					
		1121	24			`	/				AUTHORIZ	ED SIGNATUR	E						
DO		10-10	- FOC. NI	MOCO						R STATE ACC		THE RESERVE OF THE RESERVE OF THE PERSON OF							
(0	AX VEND	OR CODE	DOC NU	!	VERRIDE		OC DATE	EFT IND		BUDGET FY 2025	ACTIO NEW/M		TYPE			T SELLER FUND		SELLER GCY	
					712,4102	177116	OATOR	Y	l ILAI	po's only (Y/N)				TEXT (po's or	niy)				
RE	DOC TYP	E	REF DO	OC NUMBE	ER	REF D	OC LINE	СОМ	LN	VEND INV		СОМ	MODITY	CODE		GS CONTRA	CT		
LINE	FUND	AGCY	ORG	SUB	ACTV	FUNC	OBJT	SUB OBJT	JOB	NUMBER	REP CAT	QUANTITY / UNITS	UD	DESCRIPTION	ON	AMOUNT		I/D P/I	
01	0340	269	4610	20			4125									18,365.0	0		
03				-													\dashv		
04													\vdash				+		
05																	\dashv	-	
06			-																
07																			
										,	DOC	JMENT	TOT	AL _		18	,36	5.00	

STATE OF IOWA

GAX

								eral Accounting Expenditure DOCUMENT NUMBE										BE	R
	2	024	,			DATE 2/2024				ACC									
			VENDOR C	ODE	Q/ 1.	C/ Z U Z - Y	1				***************************************	AGENCY NA	ME		<u> </u>	2		*******	
120	of Neva 9 6th St ada, IA	ada reet	OR NAME AN	ID ADDRE	SS	of 2001 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Iowa E 200 E Des M	Econor . Gran	d Ave.		SHIP TO ADDRESS								
	Q	I EKK UANTITY	15			-OB					NYOICE NUM				GOO DATE	DS RECEIVE PERFORM INITI	MED	CES	
OF	DERED	RE	CEIVED		IIT OF ASURE	2.47.2			18.0 (18.0 18.0 (1		Time to the same of the same o	76.	1600	UNIT PRIC	CE	тот	AL PRIC	E.W	Al.
						Conti	uest for Payment under CDBG ract Number: 20-CVN-068 ort Number: 2									50,179.00			
					······································		<u> </u>	eltr	ier	Project		P. A.	<u> </u>	At 1984 15 pages are a			······································	***********	
PROF	NESS UNDI	EBJHE AI ØRRECT,	CLA MS FOR WHI UTHORITY O AND NO PA	CH PAYMI F THE LA	ENT IS CLA WAND TH	AT THE CH	E FURNIS ARGES AF	HED FOR	STATE DNABLE,		CODE O	AG THAT THE ABO AND SHOUD E R CHAPTE	ENC OVE EX BE PAIR R SE	D FROM THE	TIFICA RE INCURE FUNDS A	RED AND THE	50,1 AMOUND BY:		
	8	112	Ind				V				AUTHORIZ	ED SIGNATUR	(E						
no	C TYPE	K. M. C. 1948	DOC NIL	IMBER	TAGAY.	THE	OLLOWIN C DATE	G FIELD	SAREFO	OR STATE ACC			\$	7-A-14-5			Again,	iri.	
(BAX)		2				OBAIL		GIG PKI	FY	ACTIOI NEW/MC		TYF	E IND		NT SELLER FUND	INT:	GCY	
		OR CODE			VERRIDE	F/A IND	CATOR	EFTING	TEXT	2025 -po's only (Y/N)			1	TEXT (po	's only)	·/	<u></u>		
REF DOC TYPE REF DOC NUMBER				ĒR	REF D	OC LINE	C LINE COM LN VEND INVOICE # COMMODITY COD						TY CODE	G\$ CONTRACT					
LINE	FUND	AGCY	ORG	SUB	ACTV	FUNC	OBJT	SUB	101	ے S NUMBER	REP CAT	QUANTITY	lov	DESCRI	PTION	L AMOU	maya I	VO	-DIE
01	0340	269	4610	ORG 20		0.0042748	4125	OBJT	(2) (A) (A)			UNITS	151	randi yan y		50,179			
02												 	╁┼		,,,	00,179	.55	\dashv	
03																		\exists	
04						**							igsquare						
05 06				 					 			ļ		···. ··· ··· ··· ··· ··· ··· ··· ··· ··	······································	<u> </u>		\Box	
07		***************************************							 				╂			<u> </u>		_	
			<u> </u>	L	!				L		חחרי	IRACENT	ᆛ	TAI		L	0 47	=	
	GA.	\		WARR	A K.177 JL					ITED BY	<u> </u>	<u>JMENT</u>	10	 1	DOATE		0,17	ن .ر	70