Vendor's Name Estimate Number Covered Total Amount Warrant Vendor's Name Estimate Number Covered Of Invoice Number Date Paid Funding Source, Amount Expended, Drawdown Number Funding Source; Fundin	UNIFORM INVOICE TRACKIN	NG SPREADSHEET F		Anywhere Wa	ter and Sev	ver District			DATE:	6/19/2023				
Vendor's Name														Total Amount
Engineering Inc. 1000 11/02/07 \$400.00 4301 11/15/07 \$0.00 \$0.														Paid This
Engineering Inc. 1000 11/02/07 \$400.00 4301 11/15/07 \$0.00 \$	Vendor's Name	Estimate Number	Covered	of Invoice	Number	Date Paid								Invoice
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Management Services														\$1,500.00
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TOTALS \$4,100.00 \$800.00 \$900.00 \$300.00 \$1,700.00 \$400.00 \$4,10 Copy and submit to the applicable funding agency with each drawdown request. Image: Company of the company													_	\$0.00
Copy and submit to the applicable funding agency with each drawdown request. Montana Department of Commerce MCEP Grant Administration Manual Montana Department of Commerce MCEP Grant Administration Manual Montana Department MCEP Grant Administration Manual MCEP Grant Administration MCE			TOTALS										\vdash	\$4,100.00
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