

PO Box 1192  
Saratoga, WY 82331

# Invoice

**Invoice #:** 158

**Invoice Date:** 4/6/2023

**Due Date:** 5/8/2023

**Project:**

**P.O. Number:**

**Bill To:**

Town of Saratoga  
PO Box 486  
Saratoga, WY 82331

Date	Description	Amount
4/6/2023	FY 2023 4th Quarter Ambulance Service Payment	12,675.00

Happy New Year!

<b>Total</b>	<b>\$12,675.00</b>
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<b>Payments/Credits</b>	<b>\$0.00</b>
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<b>Balance Due</b>	<b>\$12,675.00</b>
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Phone #
(307) 380-3077

E-Mail
bookkeeper@scwems.org