Waller County Check Request/Reimbursement Form

Employee submitting request:		Trey Duhon III			
Department:		County Judge's Office			
Total Amount Due:		\$4,869.09			
Please make check payable to:					
Name:	Trey Duhon III	10718			
Address:					
			Registratio		8079
Please ma	ail check to:		Joan Sarge Deputy	ent Waller Co	D-do-dS
Name:	Will pick up				
Address:					
Purpose of check: Christmas trees for new courthouse					
			1	OCT20'259M	9:59AUDITOR
	Acres de la companya				
	Ω				
Charge to	GL ling: 1/ (00/07 600	- 581839	DCT	15'25PM12:5	1TREASURER
			10/15/	25	
Signature of	f Person Submitting Request		Date		
9	D_R.Rott		10/15/2	5	
Signature of	f Official/Department Head Submitting B	lequest	Date		