

**VOUCHER REGISTER
BATCH SLIP NOTICE**

Agency
Business Unit: _____

PAY GROUP:

Batch No.:

Voucher Count: _____

Batch Total: \$ _____

RESERVED - OA9S

Date: _____

Auditor: _____

Note:

Voucher Numbers/Amount Assigned to Batch:

Voucher No.	Amount	Voucher No.	Amount
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I hereby approve the vouchers included in this batch and certify they comply with the purchasing laws, travel laws, and payroll rules and regulations of this State, as appropriate. (62 O.S., § 41.26)

Agency's Approving Officer

Title

Date