CL

COUNTY OF ONONDAGA STRAIGHT CLAIM

CL

275813

ii .	CLAIMED BY	MOSI BE EXECUT	ED BY AFMD	OR AND RETU	IKNED	
C	MY ARTS, Inc. IKIA CUHUVAL RES		MBRUS	PREP DATE 9 / 19 / 13	PRE AUDIT	ENTRY
L7	IKIA Cultural Res	ources Council)	PHONE #		I ARTMENT NAME/AGENO	Y
42	4 montgomeny St	rest	435-3516	County Ex	ecutives offer	
54	Macuse NY 1320	2_	ORDER DATE	PERSON APPRO	VING C'I	DĄTE
∥						7k4/13
	SPECIFIC DESCRIPTIO	N OF GOODS OR SERVIC	ES	QUANTITY	UNIT PRICE	TOTAL LINE
7	ee for "on my co	ion Time" a	t			
اع ا	zhio ⁿ	+ t				650.00
<u> </u>	THIS CERTIFICATION MUST E	BE MADE BY CLAIMANT P	ERSONALLY IF A	AN INDIVIDUAL	TOTAL	\$ 650,00
I hereby		OF THE FIRM OR OFFICE	ER OF A COMPA	NY		
dates an	nd for the prices billed; that the bill is jus	st, true and correct; that no part t	hereof has been paid	except as stated there	ein and ALLOWED	\$
	balance therein stated is actually due is exempt are excluded therefrom.					
	im who will benefit from, or is a party		• .	•		
	·			-	CNY Auts	In
	SIGNATURE		DATE		NAME OF CO	MPANY
	DOCUMENT NUMBER CL	275813			i - (v)
	VENDOR NUMBER/SUFFIX	000005801	-	DOCUMENT AMO		<u>.</u>
	DUE DATE (MM/DD/YY)	1990-0-0-1-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0	_	NO. OF LINES		-
	SINGLE CHECK Y OR N (CIRC	CLE ONE)		PD BY CHECK#		
SFX	DOC REF/SFX			RIPTION - 26 Ch		
	AMOUNT	SPEED TYPE	ACCOUNT	USER CODE	PROJECT	SUBSIDIARY
01	1 . 7 (1)	litanti	1///			
	650, CW	140061	1065000			<u> </u>
02			T			
03			1	<u>-</u>		-
			<u>L</u>	L		
04	1	1				
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05						
05 06						

Statement

CNY Arts, Inc. (f/k/a Cultural Resources Council) 421 Montgomery St. 11th Fl. Syracuse, NY 13202

Date					
8/31/2013					

				Amount Due	Amount Enc.	
			<u></u>	\$650.00		
Date	Transaction			Amount	Balance	
05/22/2013	INV #467. Orig. Amo	unt \$650.00.		650.00	650.00	
					·	
CURRENT	1-30 DAYS PAST DUE	31-60 DAYS PAST DUE	61-90 DAYS PAST DUE	OVER 90 DAYS PAST DUE	Amount Due	
0.00	0.00	0.00	650.00	0.00	\$650.00	