

Standard Form 1034 September 1973 Treasury FRM 2000	<b>PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL</b>	VOUCHER NO.
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U.S. DEPARTMENT, BUREAU OR ESTABLISHMENT AND LOCATION  <b>U.S. Department of Commerce Bureau of the Census Washington, DC 20233-9800</b>	DATE VOUCHER PREPARED	SCHEDULE NO.
	CONTRACT NUMBER AND DATE	PAID BY
	REQ. NUMBER AND DATE	

<b>PLEASE PRINT NAME &amp; ADDRESS BELOW:</b>  PAYEE'S NAME AND ADDRESS	DATE INVOICE RECEIVED
	DISCOUNT TERMS
	PAYEE'S ACCOUNT NUMBER

SHIPPED FROM	TO	WEIGHT	GOVERNMENT B/L NUMBER
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NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
		For participating in interview as part of research on the CPS Food Security Supplement  Center for Behavioral Science and Measurement  <b>Received by:</b> _____  <b>Date:</b> _____				<b>\$40.00</b>

(Use continuation sheet(s) if necessary)	(Payee must NOT use the space below)	<b>TOTAL</b>	
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PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR	EXCHANGE RATE	DIFFERENCES	
	<b>\$40.00</b>	<b>= \$1.00</b>		
	BY:	Amount verified correct for		
	TITLE:	(Signature or initials)		

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment

\_\_\_\_\_ (Date)                      \_\_\_\_\_ (Authorized Certifying Officer)                      \_\_\_\_\_ (Title)

**ACCOUNTING CLASSIFICATION**

Project/Task: 0906-000; Organizational Code: 11-09-0098-00-00-00-00; Obj. Class: 25-20-04-02

CHECK NUMBER ON TREASURER OF THE UNITED STATES	CHECK NUMBER ON (Name of Bank)
CASH DATE	PAYEE
PER	TITLE