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| Standard Form 1034September 1973Treasury FRM 2000 |  PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL | VOUCHER NO. |
| U.S. DEPARTMENT, BUREAU OR ESTABLISHMENT AND LOCATION U.S. Department of Commerce Bureau of the Census Washington, DC 20233-9100  | DATE VOUCHER PREPARED | SCHEDULE NO. |
| CONTRACT NUMBER AND DATE | PAID BY  |
| REQ. NUMBER AND DATE |
|  PLEASE PRINT NAME & ADDRESS BELOW:  PAYEE’S NAME ANDADDRESS |
|  DATE INVOICE RECEIVED |
| DISCOUNT TERMS |
| PAYEE’S ACCOUNT NUMBER |
| SHIPPED FROM TO WEIGHT | GOVERNMENT B/L NUMBER |
| NUMBER AND DATE OF ORDER | DATE OF DELIVERY OR SERVICE |  ARTICLES OR SERVICES *(Enter description, item number of contract or Federal supply schedule,* *and other information deemed necessary)* | QUAN-TITY | UNIT PRICE |  AMOUNT  |
| COST | PER |  |
|  |  | For participating in cognitive interview to improve the NSCH.Directorate for Demographic ProgramsDemographic Statistical Methods DivisionSurvey Methodology PoolReceived by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  | $40.00 |
| (Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL |  |
| PAYMENT:🞏 COMPLETE🞏 PARTIAL🞏 FINAL🞏 PROGRESS🞏 ADVANCE | APPROVED FOR $40.00 | EXCHANGE RATE = $1.00 |   DIFFERENCES |  |
| BY:  |  |
| TITLE:  | Amount verified correct for |  $40.00 |
| (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: 0977000-000; Organizational Code: 11-28-0087-50-50-00-00; Obj. Class: 25-10-02-00  |
| CHECK NUMBER ON TREASURER OF THE UNITED STATES | CHECK NUMBER ON (Name of Bank)  |
| CASH DATE | PAYEE |
| PER | TITLE |