# STANDARD VOUCHER

## Originating Agency
OFFICE OF THE STATE COMPTROLLER

## Original Agency Code
OSC01

## Payment Date
(MM) (DD) (YY)

## Payee ID
1000002446

## Payee Amount
1000002446

## Payee Name
COUNTY OF ESSEX

## Payee Address
TREASURER

## Payee Zip Code
12932

## Payee Route
6

## Payee City
ELIZABETHTOWN

## Description of Material/Service
2012-2013 ESSEX CO SCHOOL TAXES ON STATE OWNED LANDS

<table>
<thead>
<tr>
<th>Description</th>
<th>Quantity</th>
<th>Unit</th>
<th>Price</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>AUSABLE VALLEY C.S.D.</td>
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<tr>
<td>CROWN POINT C.S.D.</td>
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<tr>
<td>ELIZABETHTOWN-LEWIS C.S.D.</td>
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<tr>
<td>KEENE C.S.D.</td>
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<tr>
<td>LAKE PLACID C.S.D.</td>
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<td>MINERVA C.S.D.</td>
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<tr>
<td>MORIAH C.S.D.</td>
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<td>NEWCOMB C.S.D.</td>
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<td>NORTH WARREN C.S.D.</td>
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<td>PUTNAM C.S.D.</td>
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<td>SARANAC LAKE C.S.D.</td>
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<td>SCHROON LAKE C.S.D.</td>
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<td>TICONDEROGA C.S.D.</td>
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<td>WESTPORT C.S.D.</td>
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<td>WILLSBORO C.S.D.</td>
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</table>

## Payee Certification
I certify that the above bill is just, true and correct; that no part thereof has been paid except as stated and that the balance is actually due and owing, and that taxes from which the State is exempt are excluded.

## Payee Title
COUNTY TREASURER

## Payee Signature

## Payee Date
08 / 29 / 12

## Merchandise Received
I certify that this voucher is correct and just, and payment is approved, and the goods or services rendered or furnished are used in the performance of the official functions and duties of this agency.

## Authorized Signature

## Name of Company

## Date
08 / 29 / 12

## Special Approval
(as Required)

## Number of continuation forms attached

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XREF: 806448