

**DEPARTMENT OF ADMINISTRATION
STATE ACCOUNTING BUREAU
PO BOX 200102
HELENA, MT 59620-0102**

**224 - COPY OF
CASHED
WARRANT**

Contact Warrant Writer Unit with questions. E-mail: warrantwriter@mt.gov, Phone: 444-3092, Fax: 444-2812

Note: All incomplete/altered forms will not be processed

| | | |
|------------------------------------|--|--------------------------|
| 1) AP Business Unit | 2) Voucher ID | 3) Vendor ID |
| 4) Payee Name: | | |
| 5) Reference (Warrant No) | 6) Issue Date (mm/dd/yyyy) | 7) Warrant Amount |
| 8) Cashed Date (mm/dd/yyyy) | 9) Spray (Sequence) No (for warrants cashed before 3/26/2001) | |

10) Attach a SABHRS Payment Inquiry/Vouchers for a Payment Print Screen

Navigate to SABHRS Financials:

- SABHRS Applications/Financials/Accounts Payable/Review Accounts Payable Info/Payments/Payment.
- Input: Reference (Warrant Number), and click the *Search* button to display *Payment Inquiry* screen.
- Click on *Payment Reference ID* to display the *Vouchers For a Payment* screen.

| | | |
|---------------------------------|----------------------|--------------------------------|
| 11) Agency Contact | | 12) Agency Phone Number |
| 13) Agency Authorization | Authorized Signature | Date |

| To Be Completed by Department of Administration | | |
|---|----------------------|------|
| D of A Approval | Authorized Signature | Date |