FORM A19-1A (REV.5/91)	STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY		
AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.

AGENCY NAME

Puget Sound Partnership
326 East D Street
Tacoma, WA 98421

VENDOR OR CLAIMANT (Warrant is to be payable to)

Snohomish County Dept. of Public Works
Attn: Accounts Receivable
3000 Rockefeller Ave, MS 607
Everett, WA 98201

Invoice #: 6
Agreement #: 2020-28
Billing period: 3/1/20-3/31/20

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials. merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status. Race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

BY: Brian Beason, Administrative Operations Manager
(SIGN IN INK)

5.5.2020
(DATE)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO.

RECEIVED BY

DATE REVIEWED

Description	Budget	Cumulative	Balance	Invoice Amount	FOR AGENCY USE
Task 1 - Organize, support, administer, facilitate and coordinate a LIO	$ 29,814.00	$ 17,781.42	$ 12,032.58	$ 1,140.43	
Task 2 - Steward and Implement the Action Agenda	$ 27,181.00	$ 5,200.21	$ 21,980.79	$ 636.12	
Task 3 - Performance Management	$ 2,500.00	$ 691.80	$ 1,808.20	$ 59.97	
Task 4 - Support communication, adaptive management, and synthesis of Ecosystem	$ 15,505.00	$ 3,848.59	$ 11,656.41	$ -	
Total	$ 75,000.00	$ 27,522.02	$ 47,477.98	$ 1,836.52	

Prepared By	Telephone Number	Date	Agency Approval	Date
Michele Anton	425-388-3802	5/4/2020		

Document Date	Pmt Due Date	Current Document No.	Ref. Doc No.	Vendor Number	Vendor Message	UBI #
				SWV0002794-17		

Doc Suf	Trans Code	MOD	Fund	Master Index: Appn Index	Master Index: Program Index	Sub Obj	Sub Sub Object	Org Index	WorkClass ALLOC	County Budget Unit	City/Town MOS	PROJECT	Sub Proj	Proj Phas	AMOUNT	Invoice Number

Accounting Approval for Payment	Date	Warrant Total	Warrant Number