

045730

Payee City of Portland  
Vendor ID 2259

Account #:

045730  
4/15/2016

Invoice	Description	Discount	Amount
API041604-21	Day of Caring Event Staging Permit	\$0.00	\$30.00



Total : \$0.00 \$30.00

THIS DOCUMENT IS PROTECTED BY MULTIPLE SECURE RIGHT CHECK SECURITY FEATURES - DETAILS ON BACK



P.O. BOX 15200  
PORTLAND, ME 04112-5200  
(207) 874-1000



52-7445  
2112

045730  
DATE 045730

United Way  
of Greater Portland

AMOUNT

PAY  
\*\*\*Thirty and 00/100 Dollars

4/15/2016 \$30.00

VOID AFTER 90 DAYS

TO THE City of Portland  
ORDER 389 Congress Street  
OF Portland, ME 04101

*McCaskey*  
AUTHORIZED SIGNATURE

SECURITY FEATURES  
INCLUDES  
DETAILS ON BACK

⑈045730⑈ ⑆211274450⑆ 0290 84928⑈

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