

Prescribed by State Board of Accounts

City Form No. 205 (Rev. 1960)

Appr. No. _____

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____

_____, 19____ Fund

_____, Ind.

No. 00000

TREASURER OF CITY OF _____

Pay to the

Order of _____

\$ _____

subject to all del. tax charged against payee
For _____
Not Good Unless Counter signed by Treasurer
Dollars

A Public Depository

Countersigned

Treasurer

Controller

(Original Copy)