

To

(Governmental Unit)

County, Indiana

PUBLISHER'S CLAIM

LINE COUNT

Display Master (Must not exceed two actual lines, neither of which shall
total more than four solid lines of the type in which the body of the
advertisement is set) -- number of equivalent lines
Head -- number of lines
Body -- number of lines
Tail -- number of lines
Total number of lines in notice

COMPUTATION OF CHARGES

..... lines, columns wide equals equivalent lines at cents per line

\$

Additional charges for notices containing rule or tabular work (50 per cent of above amount)

Charge for extra proofs of publication (\$1.00 for each proof in excess of two)

TOTAL AMOUNT OF CLAIM \$

DATA FOR COMPUTING COST

Width of single column in picas..... Size of type.....point.
Number of insertions.....

Pursuant to the provisions and penalties of IC 5-11-10-1, I hereby certify that the foregoing account is just and correct, that the amount claimed is legally due, after allowing all just credits, and that no part of the same has been paid.

I also certify that the printed matter attached hereto is a true copy, of the same column width and type size, which was duly published in said paper times. The dates of publication being as follows:

.....
.....

Additionally, the statement checked below is true and correct:

..... Newspaper does not have a Web site.
..... Newspaper has a Web site and this public notice was posted on the same day as it was published in the newspaper.
..... Newspaper has a Web site, but due to technical problem or error, public notice was posted on
..... Newspaper has a Web site but refuses to post the public notice.

.....
.....

Date

Title.....

Claim No. _____ Warrant No. _____

IN FAVOR OF

\$ _____

I have examined the within claim and hereby certify as follows:

That it is in proper form.

That it is duly authenticated as required by law.

That it is based upon statutory authority.

That it is apparently CORRECT / INCORRECT

ON ACCOUNT OF APPROPRIATION FOR

I certify that the within claim is true and correct; that the services there in itemized and for which charge is made were ordered by me and were necessary to the public business

Appropriation No. _____

ALLOWED _____

IN THE SUM OF \$ _____

