



Harnett
C O U N T Y
 NORTH CAROLINA

COUNTY OF HARNETT
CHECK REQUEST FORM

Account Number: 110-0000-345.18-00
 Project Number: _____
 Vendor Name: Kimberly Galbreath
 Vendor Number: _____
 Remittance Address: 414 Mills House Lane
Date: February 24, 2017 Spring Lake, NC 28390

Mail to payee
 Check to be picked up by: _____

 (Requires approval of Finance Officer)
 Approved: _____ Disapproved: _____

	Description	Amount
	ENVH Well Fee	\$ 250.00
	Location : Lt. 2, 414 Mills House Lane	
	HTE # 17-5-40712	
Total Amount Due		\$ 250.00

Reason for check request: Customer already has a well on the property and wants to use it instead of
creating a new well.

This check request has been examined by me and is hereby approved for payment.

 Department Head or Authorized Designee Date

Graham H. Byrd, R.E.H.S. _____

*This instrument has been
 preaudited in the manner required
 by the Local Government Budget
 and Fiscal Control Act*

 Harnett County Finance Director