

WHATCOM COUNTY

AUTHORIZATION TO VOID/ CANCEL WARRANT

Warrant Number: _____

Warrant Date: _____

Vendor Number: _____

Vendor Name: _____

Amount: _____

Requested by: _____

Reason for voiding/ canceling the warrant: _____

If the warrant is to be reissued:

Vendor Number: _____

Vendor Name: _____

Address: _____

We, the undersigned Commissioners of Whatcom County _____,
hereby authorize cancellation, and if indicated the reissuance, of the above warrant as herein described.

Chairman

Commissoner

Commissoner

Date: _____

Voided/ Canceled warrants from the current year are refunds of expenditures.

Voided/ Canceled warrants from the prior years are miscellaneous receipts.

Warrant Voided by: _____

Date: _____

Reissue Warrant No.: _____

Date Reissued: _____