

• 2875 E CHARLESTON •
(IN COUNTY)

CITY of LAS VEGAS CLAIM FOR REFUND

9/13/83

Date

TO: Department of Financial Management, Accounts Payable

Please issue warrant to:

O'Murphy King
Name

1916 S. Highland
Address

Las Vegas NV 89102
City, State, Zip Code

In the amount of

\$ 21.00

For the following:

2814 Document # (i.e., GR#, Business License #, Permit #) 9/12/83 Date

\$ 21.00 Amount Phy - 2875 E. Chap For

Deposited by _____

Reason for refund: In County

Sharon King
Authorized by

Adm. Secretary
Title

I certify this demand is true and correct; is unpaid and due the claimant.

Mary Jane Plante
Claimant Signature

| FUND ORG | ACCT | TASK | OPT. | ACT/WA |
|----------|------|------|------|--------|
| 3310 | 2403 | | | |