

THE STATE OF ALABAMA,

Vendor Number _____

Payable to _____ Sheriff of _____ County.

For feeding prisoners in the jail of said county during the month of _____, 20____

Date	Total # In Jail	Insane	Juvenile	Federal	Other	# In Jail State	Per Capita	Amount State	Date	# In Jail State	Sheriff's Allowance
	+	-	-	-	-	=	x	=			
1							\$ 1.75		1		
2							\$ 1.75		2		
3							\$ 1.75		3		
4							\$ 1.75		4		
5							\$ 1.75		5		
6							\$ 1.75		6		
7							\$ 1.75		7		
8							\$ 1.75		8		
9							\$ 1.75		9		
10							\$ 1.75		10		
11							\$ 1.75		11		
12							\$ 1.75		12		
13							\$ 1.75		13		
14							\$ 1.75		14		
15							\$ 1.75		15		
16							\$ 1.75		16		
17							\$ 1.75		17		
18							\$ 1.75		18		
19							\$ 1.75		19		
20							\$ 1.75		20		
21							\$ 1.75		21		
22							\$ 1.75		22		
23							\$ 1.75		23		
24							\$ 1.75		24		
25							\$ 1.75		25		
26							\$ 1.75		26		
27							\$ 1.75		27		
28							\$ 1.75		28		
29							\$ 1.75		29		
30							\$ 1.75		30		
31							\$ 1.75		31		
TOTAL							\$ 1.75	\$	TOTAL		\$

Amount Chargeable to the State (0900-14) \$ _____

Sheriff's Allowance (0900-31) \$ _____

TOTAL AMOUNT _____

Affadavit of the Sheriff before Notary Public

The State of Alabama _____, County

Before me _____ Notary Public, personally appeared

 Sheriff of said County, who being by me sworn,

makes oath that the within account for _____ Dollars is correct and that no part here of has been paid.

 Sheriff Signature

Sworn to and subscribe before me this _____ day of _____, 20____.

 Notary Public Signature