

793  
City of Providence  
OFFICE OF THE CITY CONTROLLER

**MEMORANDUM**

DATE November 28, 1977

**TO:** Committee on Finance

**FROM:** Steven A. Pitassi, Acting City Controller

**SUBJECT:** Retirement Fund

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In response to your request asking if the \$1,000,000.00 owed the Retirement Fund of the City of Providence prior to the new Fiscal year has been paid into the fund. Attached you will find a copy of the Invoice showing a total amount of \$1,153,013.00 has been paid into the Employees Retirement system. This represents the final amount due on the 1976-1977 Budget.

If there are any other questions please contact me.

IN CITY COUNCIL  
DEC 1 1977

READ:

WHEREUPON IT IS ORDERED THAT  
THE SAME BE RECEIVED.

*Rose M. Menalaca* CLERK

CITY OF PROVIDENCE  
OFFICE OF THE CONTROLLER  
CITY HALL, PROVIDENCE, R. I.

# INVOICE

VOUCHER NO.

CLAIMANT PLEASE  
LEAVE BLANK

DEPARTMENT Emp. Retirement System

DIVISION (pensions)

LOCATION TO  
WHICH DELIVERED

NAME  
AND  
ADDRESS  
OF  
CLAIMANT

Employee Retirement System of  
City of Providence  
Trust & Special  
(5-352)

INDICATED INFORMATION MUST  
BE COPIED FROM PURCHASE ORDER

PURCHASE ORDER NO. Direct Payment

FUND General

APPROPRIATION

ACCOUNT CODES					
Fund	Dept.	Div.	Approp.	Object	Cost Account
1	99	20	0	00	

TERMS:  
Unless otherwise specified 2% will be deducted for  
payment within 15 days from receipt of invoice or  
goods—whichever is later.

INVOICE DATE November 28, 1977

VENDOR'S  
INVOICE NO.

Please Indicate Whether This Invoice Is For ☐ PARTIAL DELIVERY or ☐ COMPLETE OR FINAL DELIVERY

QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	AMOUNT
		Final amount due on 1976-1977 Budget.		\$1,153,013.00
		Approved for payment <i>Steven A. Petassi</i>		
		CITY OF PROVIDENCE		

CLAIMANT: PLEASE DO NOT WRITE BELOW DOUBLE LINE

TOTAL GROSS AMOUNT → \$1,153,013.00

INSTRUCTIONS TO CLAIMANT 1. ALL INVOICES MUST BE ON THIS FORM.. 2. INVOICES SHOULD BE SUBMITTED IMMEDIATELY FOR EACH SHIPMENT. 3. DO NOT INCLUDE ITEMS FROM MORE THAN ONE PURCHASE ORDER. 4. ALL SPACES AT TOP OF FORM MUST BE FILLED IN. 5. PREPARE FOUR COPIES - USE TYPEWRITER OR INK, RETAIN 4TH COPY AND SEND FIRST THREE TO  CITY CONTROLLER City Hall Providence 3, R. I.	AMOUNT OF RE-ENCUMBRANCE		AMOUNT OF ENCUMBRANCE LIQUIDATION		CASH DISCOUNT	
	\$		\$		Net Amount of Payment	\$1,153,013.00
		Computations	Other Pre-Audit	APPROVED FOR PAYMENT: <i>Paul</i> 11/28/77		
		Review	Card Punched			
		Card Verified	Summary Register Prepared by			

1 - City Controller