

STATEMENT OF REMITTANCE

VOUCHER NUMBER	INVOICE NUMBER	DESCRIPTION	CONTACT INFORMATION	DATE	AMOUNT
6607690	PSI205184	EXOTIC AQUATIC PLANT CONTROL	(603) 271-2090 Jacqueline.L.Comeau@des.nh.gov	09/30/25	475.00

If you have further payment questions, reference the contact information provided next to the line item in question.

TOTALS: \$475.00

INFORMATION MESSAGE

Questions On Your Payment?

Please use the contact information provided above in the fourth column from the left.

Page 1 of 1

State of New Hampshire
Office of State Treasurer
25 Capitol Street - Rm. 121
Concord, NH 03301

State of New Hampshire
Vendor Payments

Bank of America
Concord, NH

10/28/25

2444590

DIRECT DEPOSIT ADVICE

PAY EXACTLY VOID VOID VOID VOID VOID VOID VOID

\$ *****475.00

NON-NEGOTIABLE

PAY TO THE ORDER OF
TOWN OF BOW
10 Grandview Rd
Bow NH 03304
177364