VOUCHER

P O #_____ Voucher #_____

TOWN OF MOUNT HOPE

1706 Route 211 West
Otisville, Orange County, New York 10963

General Fund

Date Voucher Received		
FUND - APPROPRIATION	AMOUNT	
TOTAL		
ABSTRACT NO.		

Claimant's Name And Address

Terms _____ Vendor's Ref. No. _____

Date	Vendor's Invoice No.	Quantity	Description of Materials or Service	Unit Price		Amount	
				Total			

CLAIMANT'S CERTIFICATION

I, _____, certify that the above in the amount of $ _____ is true And correct; that the items, services and disbursements charged were rendered to or for the municipality on the dates stated; that no part has been paid or satisfied; that taxes, from which the municipality is exempt, are not included; and that the amount claimed is actually due.

_____ DATE

_____ SIGNATURE

_____ TITLE

(Space below for Municipal Use)

DEPARTMENT APPROVAL

The above services or materials were rendered or furnished to the municipality on the dates stated and the charges are correct.

_____ Date

_____ Authorized Official

APPROVAL FOR PAYMENT

This claim is approved and ordered paid from the appropriations indicated above.

_____ _____

_____ _____

_____ _____

Date Auditing Board