

# VOUCHER

1 of 1

**TOWN OF MOREAU**  
351 Reynolds Road  
Moreau, New York 12828-9261

Purchase Order No.

Date Voucher Received	
Fund - Appropriation	Amount
	\$ -
<b>TOTAL</b>	\$ -

VOUCHER NO.

Department(s): \_\_\_\_\_

Claimant's  
Name  
and  
Address

Date	Quantity	Description of Materials or Services	Unit Price	Amount
			<b>TOTAL</b>	\$ -

### Claimant's Certification

I \_\_\_\_\_, certify that the above account 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 appropriation indicated above.

\_\_\_\_\_ Date

\_\_\_\_\_ Auditing Board