



VOUCHER

GREEN TOWNSHIP BOARD OF EDUCATION

69 Mackerly Rd., P.O. Box 14
Greendell, New Jersey 07839

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PURCHASE ORDER NUMBER		
DATE		
VENDOR CODE		
TOTAL AMOUNT		

Quantity	Please Furnish the Following Items:	Unit Price	Amount

THIS VOUCHER MUST BE SIGNED AND RETURNED FOR PAYMENT		TOTAL AMOUNT	
VENDORS DECLARATION I declare that the goods or services itemized in this bill have been delivered or rendered; that no bonus has been given or received by any person or persons with the knowledge of the Board Office; and that the above bill is true and correct. _____ SIGNATURE AND TITLE _____ DATE	DATE PAID		
	CHECK NO.	NOT VALID UNLESS SIGNED BY BOARD SECRETARY	
	APPROVED BY	By _____ BOARD SECRETARY	