

VOUCHER Kenmore –Town of Tonawanda

Union Free Schools District

1500 Colvin Boulevard

Buffalo, NY 14223-1196

Voucher No. _____ Vendor's No _____

Vendor name _____

Address _____

Social Security No. _____

Voucher Date

Warrant No. _____

Account Number(s)
TO BE RETURNED TO
HUMAN RESOURCES
EACH MONTH

Quantity	Description	Price	Total
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Mileage from

See attached Transportation Allowance Form

This is to certify that the labor services, merchandise, materials or articles changed in the within account or claim, amounting \$ _____ have been actually performed, made or delivered FOR THE KENMORE TOWN OF TONAWANDA UNION FREE SCHOOL DISTRICT; THAT THE ITEMS AND SPECIFICATIONS THEREIN ARE CORRECT; THAT THE PRICES CHARGED THEREFORE ARE REASONABLE AND JUST; that no perquisites, commissions or allowances of any kind, other than as stated in the said account have been or will be paid directly or indirectly in consideration of the procurement of said articles or services; and that the said item or items contained in this bill or claim have not been, either in whole or any part paid or satisfied and that the full amount is now due.

Signature of Claimant _____

Date _____

The undersigned certifies that the above invoice is duly audited and ready for payment.

Audit Clerk _____

HEREBY CERTIFY, that the merchandise, materials or articles enumeration in the above account have been received and the services specified performed; that they were necessary for and have been, or will be applied to the use of the Department specified by the account number.

Accounting Dept _____