## **SECURITY CARE VOUCHER**

## SUSSEX-WANTAGE BOARD OF EDUCATION 27 BANK STREET SUSSEX, NJ 07461 973-875-3175 FAX 973-702-0764

Name:

Date	Time In	Time Out	Security provided at CARE
			Before/After CARE
		CLAIMANT'S DEC	CLARATION AND CERTIFICATION
furnished or services	s rendered as stated there	in; that no bonus has be	he within bill is correct in all its particulars; that the articles have been sen given or received by any person or persons within the knowledge erein is justly due and owing and that the amount charged is a
Date:	Signature:		Position: SECURITY CARE
Date:	Approved: Superintendent of Sci	naale	<del>-</del>