SUSSEX-WANTAGE BOARD OF EDUCATION
27 Bank Street
Sussex, NJ 07461

PAYROLL VOUCHER

_____

(position)

NAME_____
ADDRESS_____
_____
PHONE_____

Do NOT combine payroll periods of the 1st-15th and the 16th-30th/31st on the same voucher

Date	Employed as a Substitute for:	Building	Start Time	End Time	# of Hours	Amount

VOUCHERS MUST BE SUBMITTED FOR PAYMENT 7 DAYS PRIOR TO 15TH AND 30TH OF EACH MONTH

CLAIMANT'S CERTIFICATION AND DECLARATION

I do solemnly declare and certify under the penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

Signature:_____ Position:_____ Date: _____

Principal/Supervisor Approval:_____ DATE:_____