



1050 East Hazelwood Avenue
 Rahway, New Jersey 07065
 Phone: 732-388-0868
 Fax: 732-382-0774

VOUCHER

Notice: Send this voucher along with Invoice to the RVSA Accounts Payable Department for payment. Payment is made only on complete orders, no partial payments. Only vouchers received by the 10th of the month will be processed for payment. Invoice will not be paid unless Claimant signs Certification and Declaration below.

Vendor Name: _____

Address: _____

FOR RVSA USE ONLY

Vendor # _____
 Voucher # _____
 Line Item # _____
 Check # _____
 Date Paid: _____
 \$ _____
 AMOUNT PAID

DATE	QUANTITY & DESCRIPTION OF ARTICLE	UNIT PRICE	AMOUNT

CLAIMANTS 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 with 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.

Date: _____ Signature: _____
 Official Position/Title: _____

The articles were received and/or the services were performed as stated above; the prices and extensions being correct.

 Signature – RVSA Official