

TOWNSHIP OF WEYMOUTH

45 SOUTH JERSEY AVENUE • P.O. BOX 53 • DOROTHY, N.J. 08317
 TEL (609) 476-2633 • FAX (609) 476-4466

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| S H I P T O | |
| V E N D O R | |

TAX EXEMPT UNDER PROVISIONS OF N.J. SALES & USE TAX ACT (CHAPTER 30, LAWS OF 1968)

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES,
 PACKING LISTS, CORRESPONDENCE, ETC.

No. _____

ORDER DATE:
 REQUISITION NO:
 DELIVERY DATE:
 STATE CONTRACT NO:
 F.O.B. TERMS:

PAYMENT RECORD

CHECK NO. _____

DATE PAID _____

CLAIMANT'S CERTIFICATION & 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.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX I.D. NO. OR SOCIAL SECURITY NO.

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

AUTHORIZED SIGNATURE

DATE

PAYMENT AUTHORIZED

DATE

SECRETARY

OFFICER'S CERTIFICATION

I, having knowledge of the facts certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

TOWNSHIP OF WEYMOUTH
 45 SOUTH JERSEY AVENUE • P.O. BOX 53
 DOROTHY, N.J. 08317

VOUCHER COPY - SIGN AT X AND RETURN FOR PAYMENT