

VOUCHER

EAST ISLIP SOCCER CLUB
 PO Box 289
 East Islip, New York 11730

(CLAIMANT - DO NOT WRITE IN THIS AREA)	VOUCHER NUMBER _____
DATE VOUCHER RECEIVED _____	
FUND - APPROPRIATION	AMOUNT
ENTERED ON ABSTRACT NO. _____	

CLAIMANT'S
 NAME
 AND
 ADDRESS

DETAILED INVOICES MAY BE ATTACHED, AND TOTAL ENTERED ON THIS VOUCHER.
 CERTIFICATION BELOW MUST BE SIGNED.

TERMS _____ PURCHASE ORDER NO. _____

DATE	VENDOR'S INVOICE NO.	QUANTITY	DESCRIPTION OF MATERIALS OR SERVICES	UNIT PRICE	AMOUNT	
(SEE INSTRUCTIONS ON REVERSE SIDE)					TOTAL	

CLAIMANT'S CERTIFICATION

I, _____, certify that the above account in the amount of \$ _____ is true and correct; that the items, services and disbursements charged were rendered to or for the East Islip Soccer Club on the dates stated; that no part has been paid or satisfied; that taxes from which the East Islip Soccer Club is exempt, are not included; and that the amount claimed is actually due.

_____ DATE _____ SIGNATURE _____ TITLE _____
 (SPACE BELOW FOR EAST ISLIP SOCCER CLUB USE)

<p align="center">CLUB APPROVAL</p> <p>The above services or materials were rendered or furnished to the East Islip Soccer Club on the dates stated and the charges are correct.</p> <p>_____ DATE AUTHORIZED OFFICIAL</p>	<p align="center">APPROVAL FOR PAYMENT</p> <p>This claim is approved and ordered paid from the appropriations indicated above.</p> <p>_____ DATE</p> <p>_____ AUDITING BOARD</p>
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