## **TOWN OF PINEDALE**

## DISBURSEMENT VOUCHER

CLAIMANT:					
ADDRESS:					
INVOICE DATE:					
FUND/ACCT#	ITEMIZED DES	SCRIPTION	QTY	UNIT PRICE	TOTAL
THE TOWN OF PINEDALE IS EXEMPT FROM SALES TAX PER W.S. 39-11-105 AND W.S. 39-15-105					
CLAIMANT DECLARATION  (IF VOUCHER IS FOR PERSONAL SERVICES, TRAVEL REIMBURSEMENT OR EXPENDITURES OTHER THAN PAYROLL UNDER A CONTRACTED PRICE)					
I DECLARE AND AFFIRM, UNDER THE PENALTIES OF PERJURY, THAT THIS CLAIM HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IS  IN ALL THINGS TRUE AND CORRECT, AND THAT NEITHER THE WHOLE, NOR ANY PART THEREOF HAS BEEN PAID.					
DATE		SIGNATURE OF CLAIMANT			
DECLARATION OF MAYOR OR CLERK-TREASURER AND/OR OTHER AUTHORIZED AGENT  I DECLARE AND AFFIRM, UNDER THE PENALTIES OF PERJURY, THAT THIS CLAIM HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IS IN ALL THINGS TRUE AND CORRECT. I FURTHER CERTIFY THAT THE ABOVE SERVICES WERE RENDERED, OR THAT THE ABOVE MATERIALS WERE RECEIVED IN AN ACCEPTABLE CONDITION, AND THAT THE ABOVE CLAIM IS HEREBY APPROVED BY ME.					
DATE		EMPLOYEE RECEIVING GOODS OR SERVICES			
DATE		MAYOR OR CLERK-TREASURER OR OTHER AGENT			
APPROVAL BY TOWN COUNCIL FOR PAYMENT					
DATE APPROVED		NOTED BY			
DATE PAID		CHECK NUMBER			