

Middletown Township Fire Company No.1

Payment Voucher

Date: _____

STAPLE ALL RECEIPTS OR INVOICES TO THIS VOUCHER

Payee Information:

Expense Reimbursement

Vendor Payment

Name _____

Address _____

City/State _____

Payment and Budget Accounting Information:

Invoice Number	Budget Account Number	Item or Service Description	Amount (Dollars/Cents)
1-	08-		.
2-	08-		.
3-	08-		.
4-	08-		.
5-	08-		.
6-	08-		.
7-	08-		.
8-	08-		.
9-	08-		.
10-	08-		.

Total Payment

\$

Budget Account Numbers

- | | | | |
|---------|-------------------------------|---------|-----------------------------------|
| 08-2000 | Capital Improvements-Building | 08-2130 | Club Committee |
| 08-2010 | Capital Improvements Fund | 08-2140 | Fitness Committee |
| 08-2020 | House & Grounds Maintenance | 08-2150 | Insurance |
| 08-2030 | Utilities | 08-2160 | Special Events |
| 08-2040 | Vehicle Maintenance -Fire | 08-2170 | Memorial Committee |
| 08-2050 | Equipment Maintenance-Fire | 08-2180 | Professional Fees |
| 08-2060 | New Equipment-Fire | 08-2190 | Soliciting Committee |
| 08-2070 | Training-Fire | 08-2200 | Memorial Fund |
| 08-2080 | Uniforms & Badges | 08-2210 | Administration & Salaries |
| 08-2090 | New Vehicle Fund | 08-2220 | Computer Systems |
| 08-2100 | Service Awards | 08-2230 | Trustees |
| 08-2110 | Good & Welfare | 08-2240 | [Reserved] |
| 08-2120 | Rental Committee | 08-2250 | [Reserved] |
| | | 08-2260 | Debt Service - Loans-Capital Impv |

Certification:

I hereby request reimbursement for expenses or authorize vendor payment for fire company equipment and/or services.

Signature: _____

Title _____