

# SHORE REGIONAL BOARD OF EDUCATION

## PAYROLL VOUCHER

**PAYMENT WILL NOT BE PROCESSED ON ANY INCOMPLETE FORMS**

Employee Name: \_\_\_\_\_

Employee Position or Assignment: \_\_\_\_\_

Date Board Approved for Service/Work: \_\_\_\_\_

Today's Date: \_\_\_\_\_

<u>Date</u>	<u>Activity</u>	<u>Hours Worked</u> <u>From – To</u>	<u>Total</u> <u>Hours</u>	<u>X's Rate</u> <u>of Pay</u>	<u>Total \$</u> <u>Amount</u>
<b>Column Totals =</b>					

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Approved By: Principal/Supervisor

\_\_\_\_\_  
Date

I do solemnly declare and certify under the penalties of law that this voucher is correct in all its particulars; that the expenses have been incurred as stated herein; 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 the amount charged is a reasonable one.

Account #: \_\_\_\_\_

Approved By: \_\_\_\_\_