



**BERNARDS TOWNSHIP
BOARD OF EDUCATION**
101 PEACHTREE ROAD • BASKING RIDGE, N.J. 07920
TEL (908) 204-2600 • FAX (908) 766-7641

PURCHASE ORDER

_____ **School Year** No.

FILL IN YOUR NAME & LOCATION TO SEND CHECK

**ONCE COURSE IS COMPLETED,
RETURN SIGNED VOUCHER WITH ALL
DOCUMENTATION TO CHRISTINA
HENDRICKS.**

BE CERTAIN TO ATTACH YELLOW PREAPPROVAL FORM SIGNED BY MR. SIET

QUANTITY	ITEM & DESCRIPTION	UNIT COST	TOTAL COST
	COLLEGE/UNIVERSITY: COURSE TITLE & NUMBER: NUMBER OF CREDITS: SEMESTER/DATE COURSE TAKEN:		

ACCOUNT NO.	DESCRIPTION	AMOUNT
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SIGN BELOW & RETURN FOR PAYMENT

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

**CLAIM VOUCHER MUST BE SIGNED AND RETURNED FOR PAYMENT WITH
VENDOR'S INVOICES ATTACHED.**

TOTAL THIS ORDER

CLAIMANT'S 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.

X

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

PRINCIPAL/ADMINISTRATOR

BOARD SECRETARY

**NO ORDER VALID UNLESS SIGNED
BY BOARD SECRETARY**

VOUCHER COPY – SIGN AT (X) AND RETURN FOR PAYMENT