Expense Voucher
Nativity of Our Lord Parish
185 Applegarth Road
Monroe, NJ 08831

Pay To:_____ Date: _____

Remittance Address: _____

_____

ITEMIZED BILLS MUST BE ATTACHED.

DATE	STORE	DESCRIPTION	AMOUNT
		TOTAL	

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 herein; 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; and that the amount charged is a reasonable one.

Sign Here: _____

Ministry: _____ Position_____