

VOUCHER

Vendor Instructions

1. Enter your invoice number.
2. Complete quantity, description, unit price, amount and total.
3. Complete and sign claimant's certification, attach invoice and return to:
COMPTROLLER – CITY HALL, ONE KENNEDY PLAZA, UTICA, NY 13502

Purchase Order
PO
Number

Department	Bureau	Requisition No.	Requisition Date	Purchase Order Date
Engineering				

Vendor No.

To:

FOR CITY USE ONLY	
Voucher No.	Check No.
Amount of Check	Date Paid

Ship To: City of Utica

VENDOR INVOICE NUMBER

Classification	Bond Ordinance No.	Date	Ordinance No.	Date	Contract No.	Award Date

QUANTITY	DESCRIPTION OF MATERIAL OR SERVICES (OFFICE ONLY)	UNIT PRICE	AMOUNT
	SIDEWALK REIMBURSEMENT PROGRAM ft. X ft. = sq. ft. sq. ft. X \$8.00/sq. ft. =		\$
		TOTAL	

CLAIMANT'S CERTIFICATION

I, _____, certify that the above amount of \$ _____ is true and correct; that the items, services and disbursements charged were rendered to or for the municipality on the dates stated; that no part has been paid or satisfied; that taxes, from which the municipality is exempt, are not included; and that the amount claimed is actually due.

 Claimant's Signature

_____ Title _____ Date _____

NOTICE TO CLAIMANT

Complete and return this form within thirty days of delivery of materials or rendering of services to:

_____ Department
 COMPTROLLER – City Hall, Utica, NY

FOR CITY USE ONLY	
Department Head	
Secretary Board of Contract and Supply	
This claim is approved and ordered paid from the appropriation indicated above.	
Comptroller – Approval for Payment	Date