VILLAGE OF ELMSFORD  
15 South Stone Avenue  
Elmsford, NY  10523  
(914) 592-6555

Payee Name:  
Address:  
City, State ZIP:  
PAYMENT TERMS:  

<table>
<thead>
<tr>
<th>P.O.#</th>
<th>Date</th>
<th>QTY.</th>
<th>ITEM DESCRIPTION</th>
<th>PRICE EACH</th>
<th>TOTAL</th>
</tr>
</thead>
</table>

PAYEE CERTIFICATION:  
I certify that the above bill is just, true and correct that no part thereof has been paid, except as stated, and that the balance is actually due and owing.

By:  
Date  
Authorized Signature  
Title

PAYER CERTIFICATION:  
I certify that this voucher is correct, just, and payment is approved.

By:  
Date  
Authorized Signature  
Title  
Department

APPROVED BY: Board of Trustees

Mayor Robert Williams
Edward Rush  
Sydney Henry  
Michael Eannazzo 
Raymond Cordi