

SUSSEX-WANTAGE BOARD OF EDUCATION  
27 Bank Street  
Sussex, NJ 07461

**SUMMER WORK PAYROLL VOUCHER 2025**

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PHONE \_\_\_\_\_

Date:	Employed as: Nurse Teacher CST Related Service Provider	Reason for Summer hours: ex: CST hours, IEP meetings, CPI	Building:	Start Time:	End Time:	# Hours	Amount Per BOE approved rate To be filled in by payroll	BOE approved date:

\*\*\*Teachers who participate in IEP meetings throughout the summer, need to be BOE approved prior to being paid\*\*\*

CLAIMANT'S CERTIFICATION AND 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.

Signature: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_

Director of Special Services Approval: \_\_\_\_\_ DATE: \_\_\_\_\_