

Date _____

INCORPORATED VILLAGE OF MUTTONTOWN
CLERK'S OFFICE

Dr. JAMES M. LIGUORI
MAYOR

JOE RUSSO
ACTING CLERK/TREASURER

WARRANT

NAME: _____

ADDRESS: _____

DATE	ACCOUNT	DESCRIPTION OF SERVICES	AMOUNT DUE

I hereby certify that the items of the claim are correct, that the property or merchandise was actually delivered, the services have been rendered, the disbursements actually and necessarily made, and not part of this claim has been paid or satisfied.

DATE _____ SIGNATURE: _____

WARRANT APPROVED BY: _____ Mayor Jim Liguori

_____ Trustee Sudha Prasad _____ Trustee Brian Fagen
_____ Trustee Chris Economou _____ Trustee Susan Dasilva
_____ Trustee Jeanine Todaro _____ Trustee Mohinder Singh