

Stanhope Neuter/Spay Sponsorship Program

Objective is to make it more affordable for Stanhope residents to have their cats neutered or spayed. The long-term goal of this program is to decrease the stray cat population in the Borough of Stanhope.

Funded by Animal Trust Fund

Not to exceed \$2000.00 of trust fund money
Maximum amount of \$50 per cat
Maximum of four (4) per household

Eligibility

Resident of Stanhope
Proof of resident: current utility, phone, or cable bill
Licensed cat

Application

Pre-approved application
Expires 60 days from date of approval

Reimbursement

Application
Payment voucher
Proof of procedure
Original receipt from veterinarian

**Applications Available at Borough Hall
Or online at Stanhopenj.gov**



Neuter/Spay Sponsorship Program

77 MAIN STREET, STANHOPE, NJ 07874 TEL: 973-347-0159

Resident's Name: _____

Address: _____

Contact Number: _____

Name of Cat: _____

License Number: _____

Breed: _____

Coloring: _____

I understand that within sixty (60) days of approval the spaying/neutering **procedure must be preformed, proper paperwork must be provided** to the Borough and a completed payment voucher must be submitted in order to collect reimbursement. Reimbursement in the amount of spaying/neutering cost up to but not exceeding fifty (50) dollars per cat. No more then four (4) reimbursements per household. Total cost of program not to exceed \$2000.

After the allotted sixty (60) days has passed and I have not met the above criteria, my approval will be void and I must reapply.

Signature

Official use

Proof of Residence	<input type="checkbox"/>
Proof of License	<input type="checkbox"/>

Application Number: _____

Application Approved on: _____

Approved by: _____

Stamp

Date and time received: _____

BOROUGH OF STANHOPE

77 MAIN STREET • STANHOPE, N.J. 07874
 TEL (973) 347-0159 • FAX (973) 347-6058

Paid: Sample

PAYMENT VOUCHER

P.O. No. _____
 Date _____
 Requisition No. _____

Vendor Code _____
 Owners Name and Address Sample
1 Main St
Stanhope NJ
07874

FUND

Current Capital
 Water Escrow
 Sewer Payroll
 Recycling Other Animal Trust

TAX I.D. #22-6002324

71140004

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	Refund of Neuter/Spay Cost Up to \$50.00 per cat Up to 4 cats per household		
2	Fluffy & Shadow	50.00	100.00
	Cat License Number: 23 24		
* Attach original copies of Veterinary bill and approved application.			

PLEASE SIGN AT X AND RETURN FOR PAYMENT

TOTAL 100.00

CERTIFICATION OF FUNDS
 I hereby certify that funds are available and encumbered.

ISSUING OFFICER _____ DATE _____

ISSUING OFFICER'S CERTIFICATION
 Having knowledge of the facts certify that the quantities and supplies have been received or the services rendered; said certification being based on original delivery slips or other reasonable procedures.

VENDOR'S CERTIFICATION & 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.

X Sample 1/1/11
 VENDOR SIGN HERE DATE

OFFICIAL POSITION _____ TAX I.D. NO. OR SOCIAL SECURITY NO. _____

NOTICE TO VENDOR OR CONTRACTOR
 1. ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURES.
 2. SHIPPING STATEMENT OR BILL OF LADING MUST ACCOMPANY SHIPMENT.
 3. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT.

APPROVED FOR PAYMENT

FINANCE COMMITTEE _____ DATE _____

FINANCE COMMITTEE _____ DATE _____