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 performed, 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

<table>
<thead>
<tr>
<th>Proof of Residence</th>
<th>Application Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proof of License</td>
<td>Application Approved on:</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>P.O. No.</th>
<th>Date</th>
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<tr>
<th>Requisition No.</th>
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FUND

- Current
- Capital
- Water
- Escrow
- Sewer
- Payroll
- Recycling
- Other

TAX I.D. #22-6002324

<table>
<thead>
<tr>
<th>QUANTITY</th>
<th>DESCRIPTION</th>
<th>LIMIT PRICE</th>
<th>AMOUNT</th>
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PLEASE SIGN AT X AND RETURN FOR PAYMENT

CERTIFICATION OF FUNDS

FINANCE OFFICER

OFFICER'S CERTIFICATION

Having knowledge of the facts certify that the

VENDOR'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under the penalties of the law that the

NOTICE TO VENDOR OR CONTRACTOR

1. ORDER NOT TO BE CHANGED WITHOUT AUTHORIZATION
2. SHIP TO: STANHOPE, N.J. 07874
3. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL
4. INVOICE MUST BE SUBMITTED TO COMPTROLLER WITH SIGNED VOUCHER

APPROVED FOR PAYMENT

VENDOR SIGNATURE

DATE

FINANCE DEPT. SIGNATURE

DATE

FINANCE COMMITTEE SIGNATURE

DATE

M.S.L. PRINTING SOLUTIONS (908) 865-1889 05053-741
BOROUGH OF STANHOPE  
77 MAIN STREET • STANHOPE, N.J. 07874  
TEL (973) 347-0159 • FAX (973) 347-6058

Vendor Code: Sample
Owner's Name and Address: 1st Ave, #1
Stanhope, NJ 07874

TAX I.D. #22-6002324

<table>
<thead>
<tr>
<th>QUANTITY</th>
<th>DESCRIPTION</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
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</thead>
<tbody>
<tr>
<td>2</td>
<td>Refund of Neuter/Spay Cost</td>
<td>50.00</td>
<td>100.00</td>
</tr>
<tr>
<td></td>
<td>Up to $50.00 per cat</td>
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<tr>
<td></td>
<td>Up to 4 cats per household</td>
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</tbody>
</table>

* Fluffy & Shadow

Cat License Number: 23
                      24

* Attach original copies of Veterinary bill and approved application.

TOTAL: 100.00

PLEASE SIGN AT X AND RETURN FOR PAYMENT

VENDOR'S CERTIFICATION & DECLARATION

I do hereby 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.

VENDOR SIGN HERE

OFFICER'S CERTIFICATION

X

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

NOTICE TO VENDOR OR CONTRACTOR

1. ORDER NOT VALID WITHOUT AUTHORIZED SIGNATURES.
2. SHIPPED INSTEAD OF BILL OF LADING MUST ACCOMPANY SHIPMENT.
3. NO CHARGES OTHER THAN THOSE SPECIFIED WILL BE ALLOWED WITHOUT APPROVAL OF THE ISSUING DEPARTMENT.