**Instructions for Completing State of New Jersey Payment Voucher**

This form is used to make payments to vendors or reimbursements to Judiciary employees.

| **(A)** Vendor federal identification number or employee ID number (9 digits). If you have any questions on the employee ID number please contact the Accounting Unit. |
| **(D)** Name and address of vendor/employee |
| **(E)** Which Department the voucher should be returned |
| **(F)** Signature of vendor or employee and Title of person signing the voucher, date of signature |
| **(G)** Invoice number from vendor invoice if applicable, or information that should appear on check stub. This is limited to 30 characters including spaces, dots, dash, etc. |

**Fund:** Accounting Use Only  
**Agcy:** Accounting Use Only  
**Org Code:** This is the four digit code as to what division is be charged for the payment  
**Activity CD:** Accounting Use Only  
**Object CD:** Accounting Use Only  

**Description of Item:** This should be description of item that we are paying the vendor/employee. There are three lines available.

**Quantity:** Number of items purchased  
**Unit:** List as each in this area  
**Unit Price:** Price of single item purchased  
**Amount:** The amount will automatically populate this field if quantity, unit, and unit price are completed correctly. This will also populate the Total Amount in Area C.

**Certification by Receiving Agency:** Should be signed by division personnel/supervisor that states they agreed with the charges and they are giving approval for payment.

Please remember to attach all original receipts to payment voucher and send to finance office for payment.