

DO NOT WRITE HERE

Voucher No. _____

FOREST FIRE BILL

Township

County

Date 1911

Amount

Report No. _____

Unless the Township Committee fixes lower rates, firewardens and their helpers are entitled to pay as follows:

Annual pay—Township firewardens, \$20. District firewardens, \$10.

Fighting fire—Any firewarden, \$2 for 5 hours or less, and 30c. per hour thereafter.

Helpers, \$1 for 5 hours or less, and 20c. per hour thereafter.

Other special service not covered by annual pay—Any firewarden, 25c. per hour. Helpers, 20c. per hour.

MEN EMPLOYED

Give name and time of each, specifying owners of teams, or automobiles, and who furnished lunches

NAME.	HOURS.	NAME.	HOURS.
1.		21.	
2.		22.	
3.		23.	
4.		24.	
5.		25.	
6.		26.	
7.		27.	
8.		28.	
9.		29.	
10.		30.	
11.		31.	
12.		32.	
13.		33.	
14.		34.	
15.		35.	
16.		36.	
17.		37.	
18.		38.	
19.		39.	
20.		40.	

For additional names attach separate sheet

MEN EMPLOYED

NAME.	TIME.
1.	
2.	
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FOREST FIRE BILL
STATE OF NEW JERSEY
DEPARTMENT OF CONSERVATION AND DEVELOPMENT

Charge for only ONE FIRE in each bill.

To the Treasurer of the Township of _____.

County of _____.

Dr.

For Forest Fire Services rendered on _____	191		
in accordance with law, viz.:			
men fighting fire	hours, at		
men patrolling, etc.	hours, at 20c. per hr.		
Firewardens fighting fire	hours, at		
Firewardens patrolling	hours, at 25c. per hr.		
Firewarden investigating	hours, on 191		
Conveyances	hours, at		
Other expenses			
Total,			

Names and titles of all persons receiving pay for any service must be shown on back.

Approved _____ 191, by resolution of the Township Committee of
 Date _____ Township _____ County.

P. O. Address _____ Sign here. *Township Clerk.*
Address of Township Clerk must be given.

I hereby certify that the sum of _____ 100
 dollars has been paid to _____ Firewarden, in full payment of above bill.
Name of Firewarden.

P. O. Address _____ Sign here. *Township Treasurer.*
Address of Township Treasurer must be given.

This bill, properly filled out and signed, should be mailed by the Township Treasurer to the State Firewarden, Trenton, as soon as payment has been made by the Township authorities and in no case later than 90 days after the date of the fire. When approved by the Department the State Treasurer will reimburse the Township for one-half the amount. Use this same form for Wardens' salary bills.

Township Officers must not write below this line
 Approved _____ 191, for \$ _____
 in favor of the Township Treasurer named above.

Checked with Firewarden's Report No. _____

and found correct.

Director of Conservation and Development.

State Firewarden.

STUB

To be detached and retained by the Township Treasurer

Memorandum of services rendered by _____ Forest Firewarden
 and helpers on _____ 191, and paid by the Township Committee on
 _____ 191, viz.:

men fighting fire	hours, at		
men patrolling, etc.	hours, at 20c. per hr.		
Firewardens fighting fire	hours, at		
Firewardens patrolling, investigating, etc.	hours, at 25c. per hr.		
conveyances	hours, at		
Other expenses			
Total,			