

**Georgetown Township  
Meeting Record**

Name \_\_\_\_\_

Date Submitted \_\_\_\_\_ Period Covered: From \_\_\_\_\_ To \_\_\_\_\_

Check One:

Date	Description	12:00AM- Noon	Noon-6:00 PM	6:00PM- 12:00AM
<b>Totals</b>				

I certify that all of meetings included in this voucher were incurred in the discharge of authorized official business and that they represent proper charges against Georgetown Township.

\_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_