

## **NJLM Educational Foundation Presents:**

**SEMINAR TITLE: New Jersey's Economy: Status of Gloom and Prospects for Bloom**

**DATE & LOCATION: Friday 10/02/09 9:00 am to 1:00pm**  
**Edward J. Bloustein School**  
**Rutgers, The State University of New Jersey**  
**33 Livingston Ave, New Brunswick, NJ**

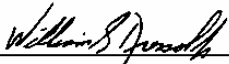
**REGISTRATION FEE: \$35.00 per Registrant**

Returning a copy of this completed form insures you a reservation at the above seminar. Just send us this form with or without a check. No need to send us your voucher for a separate signature because **This form has been approved by the Local Finance Board and meets the requirements for certification of performance of service.**

**CANCELLATION  
POLICY**

If you are unable to attend this seminar, you may transfer your registration to a colleague, or fax us three (3) working days before the seminar and we will be happy to issue a refund.

**We need a copy of your voucher/PO as promise of payment before we can process your registration**

<b>VENDOR CLAIMANT'S CERTIFICATION AND DECLARATION</b>			
I do solemnly declare and certify under the penalties of the Law that the bill/invoice statement is correct in all its particulars; that the materials have been furnished or services rendered as stated herein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.			
5/19/09	202-904-148/000		Treasurer
Date	Federal I.D. #	Signature	Official Position
<b>CERTIFICATION BY RECEIVING AGENCY</b>		<b>CERTIFICATION BY APPROVAL OFFICIAL</b>	
I, having knowledge of the facts, certify and declare that the materials have been received or the services rendered and are in compliance with the specifications or other requirements, and said certification is based on signed delivery slips or other reasonable procedures, or verifiable information.		I certify and declare that this bill/invoice statement is correct, and that sufficient funds are available to satisfy this claim. The payment shall be chargeable to:	
Signature _____		Appropriation Account(s) Charged _____ P.O. # _____	
Date _____		Amount(s): \$ _____	
Signature _____		Signature _____ Date _____	
Title _____		Title (CFO, Finance Director) _____	

**SEMINAR REGISTRATION (Please fill in all of the below information)**

	Name of Seminar Registrant	Title	Municipal Phone #	#In Case of Emergency Cancellation
1)				
2)				
3)				
4)				
5)				

Contact Person: \_\_\_\_\_  
Municipality: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

PLEASE NOTIFY US IF YOU  
 DESIRE ANY SPECIAL  
 COMMUNICATION  
 EQUIPMENT OR SERVICES

**MAKE CHECKS PAYABLE TO:**  
**NJLM Educational Foundation**  
 222 West State Street - Trenton, NJ 08608

Phone: (609) 695-3481  
 Fax: (609) 695-0151

**DIRECTIONS ARE ON THE LEAGUE WEBSITE**