

TOWNSHIP OF MANSFIELD
100 PORT MURRAY ROAD
PORT MURRAY, N.J. 07865

CHECK NO. 8820

CHECK NO.

| INVOICE NUMBER | INVOICE DATE | TRANS. DATE | PO NUMBER | DESCRIPTION | AMOUNT |
|------------------|--------------|-------------|-------------------|--------------------------|-----------|
| Vendor: STATE130 | | | | STATEWIDE INSURANCE FUND | |
| PO: 22-00210 | | | | DESC: CLAIM KY21K2654751 | 10,000.00 |
| | | | INV: KY21K2654751 | AMT: | 10,000.00 |

check date: 03/09/22 check amount: \$*****10,000.00

RECEIVED

MAR 14 2022

STATEWIDE INSURANCE FUND

Safeguard

PLEASE VERIFY BEFORE DEPOSITING AND RETAIN FOR YOUR RECORDS

TOWNSHIP OF MANSFIELD
REGULAR ACCOUNT
100 PORT MURRAY ROAD
PORT MURRAY, N.J. 07865

CHECK NO.
8820



| CHECK NO. | DATE | AMOUNT |
|-----------|------|--------|
|-----------|------|--------|

PAY: 03/09/22 8820 \$*****10,000.00

Ten Thousand AND 00/100 Dollars
TO THE
ORDER OF:

STATEWIDE INSURANCE FUND
ONE SYLVAN WAY
PARSIPPANY, NJ 07054

John Caralli



THIS DOCUMENT CONTAINS NEAR SENSITIVE INFO. TOUCH OR PRESS HERE AND MAKE SURE YOU ARE WITHIN 100 FEET.