## SCHOOL DISTRICT VOUCHER FOR PAYMENT FROM SCHOOL ACCOUNT (Bill or Claim Against the School District)



**Brookings School District No. 5-1** 2130 Eighth Street South **Brookings County, Brookings, South Dakota 57006** 

(605) 696-4700 Tax Exempt 05-001-466000 834E-RS-001

CLAIMANT:	
<b>ADDRESS</b>	

athorized agent of the clow. Such claims a ceipt for lodging ex	s for materials or supplies furnished must be itemized as to type, quantity, unit he school district as indicated below. Claims for personal service other than remust indicate time devoted and rate of pay, and if for travel must show dates, expense must be attached to voucher. If travel is by car, voucher must show milest be attached to voucher.	egular payroll under time of leaving, time	contract must als of return, points	so be verified by the sof travel, meals a	he claimant as indicate and lodging expense.
Date	Itemized Description of Materials and Supplies or Personal Service and Travel Information	Quantity	Unit Price	Total	Account Number
			TOTAL		
declare and affirn	CLAIMANT VERIFICATION IF VOUCHER IS FOR PERSON THAN PAYROLL UNDER A CONT In under the penalties of perjury that this claim has been examined by n	TRACTED PRICE	3		in all things true an
ATE:	SIGNATURE OF CLA	IMANT			
orrect. I further c	CERTIFICATION OF SUPERINTENDENT, CLERK, OR OTH under the penalties of perjury that this claim has been examined by moretify that the above services were rendered, or that the above listed is proved by me for payment this day of	ne, and to the best materials were rec	of my knowled eived in an acc	lge and belief, is	

Approved for payment by the School Board action on \_\_\_\_\_

SIGNATURE OR INITIAL OF PRESIDING OFFICER OF THE SCHOOL BOARD: \_\_\_\_