

Waverly-Shell Rock Community School

Pay Order

Date	
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PO#	
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Invoice	
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ISSUE CHECK TO:

PAY BY CREDIT CARD #: _____ (last four)

PAY BY INVOICE/STATEMENT: ** ATTACH ITEMIZED RECEIPT OR INVOICE **

Activity/Club/ Account	
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SCHOOL PURPOSE:	
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Describe the purpose for which this expenditure will be used.

Account Number	Account Description	Amount
GRAND TOTAL:		

SPECIAL INSTRUCTIONS:	
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Sponsor/Employee

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Administrator

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Business Manager