VOUCHER FOR PAYMENT

CHECK#_____

DATE_____

AMOUNT:_____

LINCOLN COUNTY SCHOOL DISTRICT#1

PO BOX 335
DIAMONDVILLE, WY 83116

TO **DATE:**

DATE:	INVOICE #	DESCRIPTION OF SUPPLIES OR SERVICES	AMOUNT
		TOTAL AMOUNT:	

PLEASE BE SURE TO ATTACH ALL NECESSARY INVOICES, RECEIPTS, AND DOCUMENTS!

PRINCIPAL APPROVAL: _____

SUPERINTENDENT APPROVAL: _____

	ACCOUNT NUMBER	***AMOUNT***
I certify, under penalty of perjury, that this voucher and the items included for payment are correct and just in all respects		
Date:		
Signed:		