



PAYROLL NOTICE

Not employee---they must be paid through central office payroll.

REQUEST INFORMATION

Date _____ **School** _____

Vendor Name _____

SSN or Tax ID # _____ **Phone** _____
(must have this or you must withhold taxes)

Address _____

SERVICE AND PAYMENT INFORMATION

Service performed _____

Amount paid _____ **Check #** _____

Check date _____

REVIEW AND APPROVAL

Bookkeeper _____ **Principal** _____

REQUIRED DOCUMENTATION AND SUBMISSION

Document must be complete prior to payment.

Information must be furnished to comply with IRS reporting requirements.

Required attachments: **Copy of check attached** **Invoice attached**

Submit the completed form, copy of check, and invoice to the business office weekly.