

 **PAYROLL VOUCHER** 

CLOVIS MUNICIPAL SCHOOLS

This description details the nature of articles or services for which payment is due from the Clovis Municipal Schools. If it is correct and the amounts listed for payment are correct, you should sign the form where indicated.

Employee Name: _____

School Location: _____ Date: _____

Service: gatekeeper ticket taker clock keeper official _____

Other: _____

Account # _____

Account # _____

Team: _____ vs. _____

of games _____ \$ _____ =Total \$ _____

I certify that the above bill is correct and just and that payment therefore has not been received.

Payee

Administrator

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