



Voucher

Ouray School District R-1

I need this check / credit card by: _____ Today's date: _____

Make check payable to: _____

Address: _____ Amount: _____

Explanation and / or special instructions for check: _____

Charge to:

Name of account: _____

Account number: _____

Person making request: _____

Approved by: _____

Administrator



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