

IRAAN-SHEFFIELD ISD  
CREDIT CARD PAYMENT AUTHORIZATION

CARD:

V -

CARD #

|             |      |             |        |
|-------------|------|-------------|--------|
| VENDOR      | DATE | BUDGET CODE | AMOUNT |
| DESCRIPTION |      |             |        |

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| VENDOR      | DATE | BUDGET CODE | AMOUNT |
| DESCRIPTION |      |             |        |

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| VENDOR      | DATE | BUDGET CODE | AMOUNT |
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| VENDOR      | DATE | BUDGET CODE | AMOUNT |
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| VENDOR      | DATE | BUDGET CODE | AMOUNT |
| DESCRIPTION |      |             |        |

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|-------------|------|-------------|--------|
| VENDOR      | DATE | BUDGET CODE | AMOUNT |
| DESCRIPTION |      |             |        |

\*Complete this form for all credit card charges, attach all receipts, and send to Business Office.

|            |       |
|------------|-------|
| SIGNATURE: | DATE: |
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