

Northeastern Catholic District School Board

101 Spruce Street North
TIMMINS ON P4N 6M9

Telephone: (705) 268-7443
Fax: (705) 264-0333

REQUEST FOR PAYMENT - SCHOOL

PAYEE: _____

DATE: _____

DETAILS: _____

AMOUNT: _____ ACCOUNT: _____

AUTHORIZED SIGNATURE: _____

APPROVED FOR PAYMENT: _____

NOTE:

1. THIS FORM MUST BE USED ONLY FOR PURCHASES UP TO \$150.00, INCLUDING GST, PST AND FREIGHT.
2. PAYMENT OF ABOVE WILL ONLY BE MADE IF THERE IS MONIES IN THE ACCOUNTS, OTHERWISE IT WILL BE RETURNED TO THE SCHOOL.
3. FOR PAYMENT, THE PACKING SLIP OR THE INVOICE MUST BE ATTACHED AND SIGNED.

Please forward to **Accounts Payable at the Timmins Board Office.**