**Belfield Public School District #13**
**PO Box 97**
**308 3rd St. NE**
**Belfield, ND 58622**

Name _____ Month/Year _____

| Description of Request (Receipts **MUST** be attached) | Amount |
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| Total | |

Signature: _____ Date: _____

Superintendent Approval: _____ Date: _____

Code: _____

Check #: _____

Check Date: _____