

**EAST SIDE UNION HIGH SCHOOL DISTRICT  
PAYMENT REQUEST**

DATE \_\_\_\_\_

Vendor Name \_\_\_\_\_

Vendor # \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

**ACCOUNT TO BE CHARGED**

FD	LO	Prog	Goal	FUNCT	OBJ	RES	YR	MANG

**AMOUNT**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TOTAL**

=====

\_\_\_\_\_

Authorized signature

<p><b>FOR BUSINESS OFFICE USE ONLY:</b></p> <p>Business Office Approval: _____</p>
--