VISTA SCHOOL
ACADEMICS · ARTS · TECHNOLOGY

Please staple your receipt(s) to the back of this form.

Check Request/Visa Charge/Debit Card

Date _____

Visa Account: N/A

Vendor (Payee): _____

Address: _____

City, State, Zip: _____

Requestor: _____

Account: _____

For Office Use Only:

Expense Account #: _____

Funding Source (class): _____

Notes: _____

Approvals:

Supervising Administrative Approval: _____ Date _____

Order Placed By: _____

Business Manager: Troy Bradshaw _____ Date _____

Order Received By: _____

Director/Principal/Vice Principal _____ Date _____
Justin Blasko / Michael Hale

Purchase Recorded in Sub-Budget: _____

Board Representative ($5,000 or more) _____ Date _____
Michelle Walter or Peter Dawson

QTY	Description	Cost	Total Cost

**** Vista School does not reimburse for sales tax

TOTAL 0.00

***Any Forms not completed correctly may be returned unprocessed

**Any and all available documentation will ensure a speedy process

*Check requests may take up to 2 weeks to complete

Updated 3/2023