CHENEY SCHOOL DISTRICT NO. 360

WARRANT NO. _____

ASSOCIATED STUDENT BODY VOUCHER

VOUCHER NO. _____

COUNTY OF SPOKANE

ASSOCIATED STUDENT BODY FUND

DATE ISSUED: _____

FROM: _____

TO: _____

ADDRESS: _____

_____

EXPLANATION

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

DISTRIBUTION

FUND CODE	AMOUNT
TOTAL	$ 0.00

I, the undersigned do hereby certify under penalty of perjury, that the materials have been furnished, the services rendered or the labor performed as described herein, and that the claim is a just, due and unpaid obligation against The Associated Student body, and that I am authorized to authenticate and certify to said claim.

SIGNED _____

BY _____

Form No. 758 (Rev 2/17)