



ST. MARTIN PARISH SCHOOL BOARD
RECEIPT FOR PAYMENT FOR NON-EMPLOYEES
CONTRACT SERVICES PROVIDED

NOTE: This form must be accompanied by an IRS W-9 form, unless one has been completed on contracted employee.
This form along with the ADMISSIONS/GATE SUMMARY REPORTS and check copies/report should accompany your collection forms and bank statement at the end of the month.

SCHOOL: _____ **DATE:** _____

EVENT: _____ (football, basketball, graduation, etc)

SERVICE PERFORMED: _____ (referee, umpire, security)

NAME OF PAYEE: _____

ADDRESS: _____

(needed to verify correct payee for a/p)

(signature of payee)

(signature of person distributing payment)

W-9 COMPLETED

HOURLY RATE: _____

AMOUNT OF PAYMENT: _____

CHECK #

OFFICE USE ONLY:

All necessary reports attached:

Check entered in AccuFund: