EXHIBIT 5-D

ROCK HILL SCHOOLS
CONTRACTED SERVICES REQUEST FOR PAYMENT

The information on this form will be compiled at year-end and, if accumulated amount for the person is $600 or more annually, reported in the form of a 1099 to the Internal Revenue Service.

NAME_____ VENDOR NUMBER _____

ADDRESS

_____

_____

INVOICE NUMBER_____ SIGNATURE_____

AMOUNT $_____ DATE RECEIVED _____

ACCOUNT NUMBER _____

SERVICE PERFORMED/EVENT:_____

_____

_____

_____ _____ _____

SCHOOL/DEPARTMENT PRINCIPAL/DIRECTOR DATE

(SEND ONE COPY OF FORM TO BUSINESS SERVICES DEPARTMENT FOR APPROVAL)

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APPROVED BY BUSINESS SERVICES DEPARTMENT