

**Reagan County Independent School District  
Check Request/Credit Card Authorization**

**Vendor Name & Address:**

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

**Select One:**

**Mail Check to Vendor**  
 **Credit Card Purchase**  
 **Hold for** \_\_\_\_\_

**Attach supporting documents**

**Budget Codes:**

\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_      \$ \_\_\_\_\_  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_      \$ \_\_\_\_\_

**Description** \_\_\_\_\_ **Amount**

**Total Due** \_\_\_\_\_

Requested by \_\_\_\_\_

Date \_\_\_\_\_

Approved by \_\_\_\_\_

Date \_\_\_\_\_

Central Office \_\_\_\_\_

Date \_\_\_\_\_

Use this form when you must have a check before making a purchase or to document authorization to charge on a school credit card. Always use a purchase order if the vendor will charge to the District. It is the policy of this district to obtain proper approval before **ALL** purchases.