

**St. Lucie County School District
Voucher for Services Rendered**

(Jessica Lunsford Act Clearance Card MUST be attached in order for payment to be processed)

The Internal Revenue Service does not require your consent to any provisions of this document other than the certification required to avoid backup withholding. Under penalties of perjury I certify that: (1) the number shown on this form is my correct taxpayer identification number; (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. Person.

Individual Name

Signature

Address

Individual Social Security Number

Zip Code

									XXXXXXXXXXXX				
School										Date			
Description of services:													
Fees: (\$) + Other Expenses (\$) = \$										Amount Due			

CUR0010 Rev. 4/08

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