

**PAYMENT TO ATHLETIC OFFICIALS  
INDEPENDENT SCHOOL DISTRICT # 271**



Vendor Number
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**Services:** The individual listed below has performed the following duties during a sporting event for Bloomington Public Schools, ISD #271.

*New Address?*

**Official's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Social Security Number/ Tax ID Number:** \_\_\_\_\_ **W9 on file?** \_\_\_\_\_  
(Required by IRS for anyone providing a service to the district)

**Background Check:** Is there a background check on file in HR? \_\_\_\_\_ (If no contact HR)

<b>Date:</b> _____	<b>Sport:</b> _____
<b>School:</b> _____	<b>Opponent:</b> _____
<i>Please Circle</i> <b>Boys or Girls</b>	<i>Please Circle</i> <b>Level: V JV SOPH. 9<sup>TH</sup> 8<sup>TH</sup> 7<sup>TH</sup></b>
<b>Duty:</b> _____ <b>Official</b> _____ <b>Timer</b> _____ <b>Scorer</b> _____ <b>Ticket Seller</b>	
_____ <b>Announcer</b> _____ <b>Lines</b> _____ <b>Supervisor</b> _____ <b>Other</b>	

<b>BUDGET CODE:</b> _____	\$
<b>BUDGET CODE:</b> _____	\$
<b>BUDGET CODE:</b> _____	\$

*Under the penalties of perjury, I declare this to be a true and correct claim and that no part of it has been paid.*

**Signed:** \_\_\_\_\_ **Approved by:** \_\_\_\_\_

**AD Signature:** \_\_\_\_\_