SHERIDAN SCHOOL DISTRICT

435 South Bridge Street
Sheridan, OR 97378
Phone | 971-261-6959

Date Returned: _____

SHERIDAN SCHOOL DISTRICT 48J
Authorization to Use District Credit Card

Sheridan School District personnel may check out a District credit card at the District Office.
This form must be completed and signed prior to check out.
By signing this form, you agree that the card will not be used for **personal use**.
Return all receipts when returning the card.

Staff Member Checking Out Card: _____

Credit Card: ☐ Adam ☐ Dorie Visa ☐ Dorie M/C ☐ Karen Visa ☐ Karen M/C

Date Card Needed: _____ Date Card Will Return: _____

Event/Meeting/Place Where Card Will Be Used: _____

Purchase Order Number: _____

_____ _____
Staff Member Signature Date

_____ _____
District Approval Date

PLEASE RETURN CARD WHEN STATED ON CHECK OUT FORM OR CALL DISTRICT OFFICE TO EXTEND DATE OF RETURN.

Rev. 12/2023