



# SOUTHERN PLAINS EDUCATION COOPERATIVE

1200 N. Park St. \* Fairmont, MN 56031  
Phone (507) 238-1472 \* Fax (507) 238-2361

## Payment Voucher 2019-2020 (NON-COOPERATIVE EMPLOYEES)

Use for all Stipends. Submit to **Laura Teveldal** by the first working day of the month in which the payment is to be made.

NAME \_\_\_\_\_ BUILDING \_\_\_\_\_

POSITION \_\_\_\_\_

Training session title \_\_\_\_\_

\_\_\_\_\_

Date of expenses \_\_\_\_\_

Amount to be Paid \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
(hourly rate if applicable) Estimated/actual total hours Total Payment  
**\*Must be Completed\***

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

STREET

CITY

STATE

ZIP CODE

**FOR OFFICE USE ONLY**

Account Code to be Charged \_\_\_\_\_

Amount to be paid \$ \_\_\_\_\_

SUPERVISOR SIGNATURE \_\_\_\_\_

Date \_\_\_\_\_