INDEPENDENT SCHOOL DISTRICT NO 2137 KINGSLAND PUBLIC SCHOOLS SPRING VALLEY, MINNESOTA

CLAIM & VERIFICATION FORM

TO:	(Recipient Information)
I declare under of it has been p	the penalties of law that this account, claim or demand is just and correct and that no par aid.
Date:	Signed
TO:	INDEPENDENT SCHOOL DISTRICT NO 2137 KINGSLAND PUBLIC SCHOOLS SPRING VALLEY, MINNESOTA CLAIM & VERIFICATION FORM (Recipient Information)

Signed _____