



## Snohomish School District

### Accounting Department

1601 Avenue D

Snohomish, Washington 98290

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Date: \_\_\_\_\_

To Whom It May Concern:

The letter authorizes \_\_\_\_\_ to make necessary purchases on behalf of the **Snohomish School District** using the Snohomish School District Card: \_\_\_\_\_ ending in \_\_\_\_\_.

Please contact \_\_\_\_\_ at \_\_\_\_\_ if you have any questions.

\_\_\_\_\_  
Signature Line

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_