


**WALLINGFORD**  **SWARTHMORE**  
SCHOOL DISTRICT

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**VIDEOGRAPHER INVOICE**

**Date Submitted:** \_\_\_\_\_

**Videographer's Name** \_\_\_\_\_

**& address:** \_\_\_\_\_

\_\_\_\_\_

<b>DATE</b>	<b>TIME</b>	<b>MEETING DESCRIPTION</b>

**Approved By:** \_\_\_\_\_

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

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