



Willard School PTG

Check Request Form

Please check one

Expense Reimbursement

Vendor Check

Requested by: _____

Today's Date: _____

Make Check Payable to: _____

In the Amount of: _____

Committee/Purpose: _____

Date needed: _____

Delivery:

' Hold at Willard

' Mail to: _____

Signature: _____

Please return form to the PTG Treasurer's Mailbox in the Willard School Office or e:mail to patriciareilly@comcast.net. Please include receipts!