

GRISWOLD PARENTS CLUB
PAYMENT AND REIMBURSEMENT REQUEST FORM

You can submit this form via the Parents Club mailbox in the School's Main Office or via email.
Please make sure to complete the entire form and attach **ALL** necessary receipts and invoices.

Requestor(s) Name: _____

Requestor(s) Contact Info (Email or Phone # for questions): _____

Committee Name: _____

Reason for this Request: _____

Notes / Comments: _____

Request for: ☐ PERSONAL REIMBURSEMENT ☐ STARTER CASH ☐ PAY VENDOR

Check / Cash Payable To: _____

Payment Amount: \$ _____

Receipt(s) or invoice are: ☐ Attached ☐ Will be Emailed Invoice #: _____

Payment should be sent directly to: ☐ Requestor ☐ Vendor

Select ONE of the below:

☐ Send check home with my child: _____ in class: _____

☐ Hold check until next Parent's Club meeting.

☐ Mail check to Requestor at: _____

☐ Mail check to Vendor at: _____

☐ I will pick up; please coordinate time/location using above contact info. (Required for cash.)

Requestor's Signature: _____ Date: _____

Griswold Parent's Club Treasurer Contact Info.: GriswoldTreasurer@gmail.com
Julie Fernandes – Cell: 860-965-5410 and Erin Georgini – Cell: 203-886-9227

FOR TREASURER USE ONLY:

Payment Made On: _____ Cash / Debit Card / Check # _____ ☐ Logged ☐ Cleared