

ITEMS ARE PROCESSED EVERY TUESDAY

WESLEYAN PARENTS CLUB
REQUEST FOR FUNDS
2011-2012 School Year

Date: _____

Individual Requesting Funds: _____

Committee Name: _____

Total Amount Requested: \$ _____

List items purchased,
Store/vendor, and \$ amt _____

All Receipts MUST Be Attached

Make Check Payable To: _____
(Name & address)

Email address: _____

Phone number: _____

Please Mail This Form AND Your Receipts To:

Michele Williams
125 High Bluff Court
Johns Creek, GA 30097

Or

Place in the WPC Treasurer mailbox in the Gillfillan mailroom

**Form should be submitted within one (1) month of when expenses are incurred
and BEFORE the committee wrap up meeting.**

**Questions: E-mail Michele Williams at michelewilliams@bellsouth.net
770-490-6360**

For WPC use only

Date Rec'd: _____ Check# _____ Date: _____ Amount: _____