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WAUKEGAN PUBLIC LIBRARY CHECK REQUEST FORM

Date Check Needed Request due by the 5th and 20th of each month Checks are cut on the 10 th and 25 th of each month Mail Check Hold for Pickup Payable to: Name Address Phone and Email
Amount Checks are cut on the 10 th and 25 th of each month Mail Check Hold for Pickup Payable to: Name Address Phone and Email
Amount Checks are cut on the 10 th and 25 th of each month Mail Check Hold for Pickup Payable to: Name Address Phone and Email
Checks are cut on the 10 th and 25 th of each month Mail Check ☐ Hold for Pickup ☐ Payable to: Name Address Phone and Email Reason for Check
Payable to: Name Address Phone and Email Reason for Check
Name Address Phone and Email Reason for Check
Address Phone and Email Reason for Check
Phone and Email Reason for Check
Reason for Check
Reason for Check
Reason for Check
Reason for Check
Reason for Check
Name of Program
Name of Grant (if applicable)
Account Number
Please attach any supporting documentation and forward to Business Office for processing.
Approval
Supervisor W9 on file
Finance Manager W9 attached
Executive Director > \$500 Contract attached
Date Paid

This form is to be used to reimburse employees for all WPL related expenditures.

All expenditures should be pre-approved by Department Head or Manager prior to purchase.

Lack of documentation or proper approvals could delay check processing.