## Payroll Claim Form

## Greenwich Central School Greenwich, NY 12834 518.692.9542

Claimant's Name

Address _		
DATE	DESCRIPTION	AMOUNT
This is to certify that the materials and services charged in the above account or claim and included in the same amounting to \$ have been actually performed for, furnished and/or delivered to the Board of Education, Greenwich, New York; that the said claim is just, due and unpaid and that there are no offsets against the same; that the items and specifications are correct; that the sums charged are seasonable and just; that no payment has been made on account thereof, except as included or referred to in such account or claim.		
Vendor's Na	me	
Date	Signature of Claimant	
Supervisor's Approval: I hereby certify that this bill has been rendered in accordance with the contract, or accepted estimate and that the work has been completed and/or the materials delivered satisfactorily.		
Date	Supervisor's Signature	