



**Queen Anne Elementary PTSA  
 Check Request Form  
 2018-2019**

Date:			
Requestor Name			
Requestor Phone		Email	
Payee	<input type="checkbox"/> Self <input type="checkbox"/> Other _____		
Check Pick Up	<input type="checkbox"/> Pick up in office <input type="checkbox"/> USPS Mail		
Payee Address			
Payee City/State/Zip			
Payee Phone		Email	

**Instructions:**

One Payee per form  
 Note the vendor/Supplier and Description and Budget/Committee for each receipt (print double sided if you have lots!!)  
 Inform Committee Lead/Board Member of request (approval required prior to reimbursement)  
 Make a copy for yourself  
 Submit forms electronically to [treasurer@qaepsa.org](mailto:treasurer@qaepsa.org) or drop in PTSA Mailbox in school office  
 AMAZON PURCHASES: Please enclose the **invoice** from your amazon order and not the order summary (found in order detail)

*This form is double sided. Only print page 2 if you have more than 8 receipts.*

Vendor/Supplier	Amount \$	Expense Description	Committee/Budget

Front Column Total:		Back Column Total:		Grand Total:	
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QAE PTSA Reimbursement form continued from front

Vendor/Supplier	Expense Description	Amount \$	Committee/Budget
Total:		(carry over to page 1)	