

Quail Valley Middle School PTO Expense Check Request Form

- This form is to be used to **request checks to pay invoices** or to **reimburse expenses** incurred for **PTO-related business**.
- Check requests for **different events/budget categories** must be submitted on **separate forms**.
- This form must be **filled out completely**, and **MUST be accompanied by an itemized receipt or invoice for each amount requested**. Credit card transactions or delivery slips/statements are not sufficient.
- Event expenses **in excess of budgeted** amounts must be **approved** by the executive board **prior** to their incurrence.
- There should be **no personal items** on any submitted receipt. **Sales tax will not be reimbursed**. **Delivery fees and tips** will be reimbursed with **documentation on a receipt**.
- Completed request forms with attached **receipts** can be scanned in a **clearly printable resolution** and emailed to the Treasurer or brought to a scheduled in-person PTO meeting. Treasurer Email: **qvmspto.treasurer@gmail.com**
- Checks for reimbursements **not requested within 60 days of the expense will not be issued** and the expense will be considered a donation to the PTO. In addition, **Check Request Forms will not be accepted after June 1st** so that the PTO financial books may be closed on June 30th, which is the end of our fiscal year.

PTO Member Information:

Name:	Date Submitted:
Signature:	
E-Mail:	Phone:
Committee Requesting Check:	
Purpose of Expense / Event:	
Make Check Payable to:	
<input type="checkbox"/> Mail Check To Address:	
Bring Check to:	
1) <input type="checkbox"/> PTO Meeting; 2) <input type="checkbox"/> [Name: _____ at _____ on _____	

Expense Information (Use one line item per receipt; one form per invoice):

Purchase Date	Place of Purchase	Description of Purchase	Amount
1.			\$
2.			\$
3.			\$
4.			\$
5.			\$
6.			\$
7.			\$
8.			\$
9.			\$
10.			\$
Total Amount Requested			\$

For Treasurer's Use:

Approval: Budget Item previously approved Board Discussion/Vote on _____

Check Date: _____ Check #: _____ Check Amount: \$ _____

Budget Category: _____

Purchase Date	Place of Purchase	Description of Purchase	Amount
11.			\$
12.			\$
13.			\$
14.			\$
15.			\$
16.			\$
17.			\$
18.			\$
19.			\$
20.			\$
21.			\$
22.			\$
23.			\$
24.			\$
25.			\$
26.			\$
27.			\$
28.			\$
29.			\$
30.			\$
Total Amount Requested			\$