

Georgia Art Education Association Check Request Form (Operation Expense)	Submit to: Lynn Fagan 6267 Cove Creek Drive Flowery Branch, GA30542 email: lynn.fagan@gcpsk12.org
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Pay to:	NAEA/GAEA Membership #:	
address:	Amount Requested:	
	Date Submitted:	
e-mail:	Date Required:	
phone:	Is this a DIRECT PAYMENT? <input type="checkbox"/> Yes <input type="checkbox"/> No	

All receipts for the previous fiscal year must be submitted before January 15 of the new fiscal year for reimbursement.

Purpose: Operational Expense

Operation Expense (Attach Receipts or Invoice)				
Date	Company	Description of Expense	Amount	Total Amount
Total to Be Reimbursed				\$

Requester	Date		
GAEA Position		Amount Due	\$

For Treasurer's Use Only		
Approved	Date	Check #
		Category#