



2015 – 2016 Check Request Form

To have an invoice paid, or to receive reimbursement for expenses paid, please complete this form. You must attach any corresponding invoice(s) or receipt(s) to obtain a check and highlight the total to be reimbursed on the receipts/invoices.

As a Not For Profit organization, the HSA does not pay sales tax on items we purchase to use or give away. **WE DO PAY TAX ON ITEMS WE PURCHASE TO SELL.** Please get in touch with Patricia Giron to get a copy of our tax exemption form before making purchases to use or give away on behalf of the HSA (pgiron80@gmail.com).

Please receive approval from a Fundraising VP or HSA VP, then put this form with the supporting documents in the HSA box in the main office in an envelope marked: HSA Presidents – Approval Needed. Jaimee Loewy or Debra Rothberg will review/approve the invoices/check requests and will get them to Patricia Giron (HSA Treasurer).

Unfortunately, e-mail request for approvals and check request forms submitted without receipts are not acceptable.

Date: _____ Amount: \$ _____

tax included – This expense is something we are planning to SELL

no tax included – This expense is something we are planning to USE/GIVE AWAY

Your Name: _____ Telephone #: _____

Make check payable to: _____

Address: _____

Reason for check (please include the name of the fundraising event when applicable):

Approved by: 1. HSA VP or Fundraising VP X _____

Approved by: 2. HSA President X _____

How would you like to receive the check? PLEASE CIRCLE (Pickup in HSA box or US mail)

For Treasurer's use only:

Check # _____ Account charged _____ Date paid _____