

Pre-Event Check Request Form

Handbell Musicians of America – Area 1

This form is used to request checks that you will need in order to pay your clinicians and others running the event. The form will enable you to pay them on the day of the event instead of sending them a check later. Please fill out at least one month before the event. Longer if mailing using the US Post.

Instructions:

1. Download this form and save it onto your Desktop **before** filling it out!
2. Open the copy from you desktop, fill out and send to treasurer@agehrarea1.org
3. List all the staff and faculty that will be paid for the event.
4. List all the costs that must be paid before the event.
5. Be sure to list the Event in the budget line item.
6. If you need more room please use the second sheet.
7. Email or send this form to the Treasure at the address listed.

Date _____ Amount _____

Person requesting funds: _____

Address: _____

City: _____ State: _____ Zip: _____

Please fill in all requested information and mail or email to the Area 1 Treasurer:

treasurer.area1@handbellmusicians.org

Requests will be processed within 15 days of receipt.

Description (person to be paid)	Amount	Event Name or Budget Item
Subtotal this page		
Subtotal back page		
Total		

(Treasurer Use Only)

Approved by _____ Date _____

Chair approval if over \$100 _____ Date _____

Date Paid _____ Check Number _____

