

# 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](mailto: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 Sue Chamberlin at:  
 1585 First NH Turnpike  
 Northwood NH 03261  
 Email: [treasurer@agehrarea1.org](mailto:treasurer@agehrarea1.org)

Requests will be processed within 15 days of receipt.

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

(Treasurer Use Only)

Approved by \_\_\_\_\_ Date \_\_\_\_\_

Chair approval if over \$100 \_\_\_\_\_ Date \_\_\_\_\_

Date Paid \_\_\_\_\_ Check Number \_\_\_\_\_

