



Vendor Payment Process & Check Request Form Instructions

VENDOR PAYMENT PROCESS

Vendor payment will be issued upon receipt of the following: (1) Email request with a pdf of the vendor invoice or (2) Fill out a HHS Music Booster Expense Reimbursement Forms and attach the vendor invoice; and (3) Please note in your request if services or product has been received or prepay vendor in advance "COD." You'll need to ensure to work with your Committee Chair and/or Treasurer and secure approval prior to incurring the expense. The Chair is responsible to ensure that the expenses are within the budget, which was approved by the Music Booster. Contact your Chair for a list of your budgeted items.

1. Fill out a HHS Music Booster Reimbursement Request Form

You can print an electronic version of the form at <http://www.homestead-music.org/forms>.

Form Instructions are below.

2. Original Vendor Invoice Required

Vendor invoice, quote and or work order must be provided for all expenses. We would prefer the original document, but photocopies or pdf will be accepted. If a required document is missing, please document this on your request.

Please note that credit card statements alone (without supporting invoices) are not acceptable.

Any exceptions must be authorized by the Music Booster Treasurer.

3. Submit request for a Vendor Payment or provide Expense Reimbursement Request Form to Music Booster Treasurer (MB Treasurer) by mail at 1086 Yorktown Dr., Sunnyvale, CA 94087 or by email in pdf to maritessmith31@gmail.com.

The MB Treasurer will review against the budget and record the transaction in the Music Booster Financial Statements. All request will then be forwarded within 10 days to the Secretary and President (or VP President) for approval.

All checks require double signature.

If you have an urgent request that needs immediate attention, please contact the Music Booster Treasurer directly.

4. **Timing of Submission:**

HHS Music Booster Vendor Payment or Expense Form Request with vendor invoice must be submitted to the MB Treasurer within 14 days of incurring the expense.

The HHS Music Booster does not reimburse for late fees/interest on credit cards or personal banking fees.

This quick turnaround is important so that Music Booster can have an accurate record of expenses in the proper month.

5. **Payment**

HHS Music Booster Vendor Payment or Reimbursement Request are paid via check through the HHSMB Treasurer. Check run process approximately 1 to 2 times monthly.

6. **Request for Advance**

Advance "Check Requests" require a request and/or approval by the Treasurer and President.

After securing the approval, prepare a Vendor Payment or Reimbursement Request Form, provide an estimate and/or quote for the upcoming expenses and make reference of the date you will need the check. Within 2 weeks of the event, please provide receipts and return any excess money.

Advance "Cash" are very special and require a request and/or approval by the Board of Music Boosters, at the monthly Board Meeting. Follow the same procedures as an "Advance Check," but reference "Advance Cash." Secure the necessary approvals by the treasurer and President, and provide the same information as you would on a check request.

7. **Questions and Concerns**

Please contact HHS Music Booster Treasurer – Marites Smith should you have any questions or concerns about this procedure at maritessmith31@gmail.com or 408.507.1590.

REIMBURSEMENT REQUEST FORM INSTRUCTIONS

- Your data: Fill in the top portion of the form including *today's date*, *"pay to" person's name or vendor name*, *address (where to send check to)*, *phone and email address*.
- Activity: Please make sure to write in a description of the expense. Please provide briefly what the expense relate to, for example, concessions, materials, uniforms, competitions, etc.
- Please include in the description the "event date" as applicable.
- Provide Vendor invoice, quote and or work order.
- Please provide any special instructions in handling the check, such as the urgency, check to be picked up. Unless otherwise noted, check will be mailed to the address on the form.
- Amount Requested: Please make sure the amount requested equals the total of the vendor invoice.
- Requestor's Signature: Please sign your request.
- *MB Treasurer will be responsible to route your request for approval by Secretary and President (or VP President).*

Sample HHS Music Booster Reimbursement Request:

HHS MUSIC BOOSTERS REIMBURSEMENT REQUEST



DATE: _____

PAY TO: _____

ADDRESS: _____

PHONE: _____

E-MAIL: _____

Describe the expense(s) briefly. Attach all receipts to this sheet. List the activity or group it relates to (concessions, materials, uniforms, competitions, winter percussion/guard, choir). Please refer to Reimbursement Policy at <http://www.homestead-music.org/forms> for guidelines.

	Activity/ Group	Amount

Check#: _____
Check Date: _____
Amount: _____

Sales Tax: _____

Total Reimbursement Requested: \$ -

REQUESTOR'S SIGNATURE: _____

AUTHORIZED APPROVAL: _____
Secretary

AUTHORIZED APPROVAL: _____
President or Vice President

*This form should be submitted to:
Marites Smith
HHS Music Boosters Treasurer
1086 Yorktown Drive, Sunnyvale, CA 94087
maritessmith31@gmail.com*