

**HUDSON RIVER FOUNDATION
FOR SCIENCE AND ENVIRONMENTAL RESEARCH, INC.**

17 Battery Place, Suite 915
New York, NY 10004

Check Transmittal Form

Grant #: _____

Principal Investigator: _____

Institution: _____

Institution Employer I.D.#: _____

Check Payable To: _____

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Institution: _____

Address: _____

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Telephone: _____ Fax: _____

Recipient's Account Number or
Identifying Number for grant: _____

Preparer of Requests
for Reimbursement: _____

Address: _____

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signature title date