



**AMERICAN LEGION AUXILIARY**  
Department of California

**Inventory/Check List of TFA Case # \_\_\_\_\_**

<b>Form Identification</b>	<b>Title</b>	<b>Notes</b>	<b>Date Sent</b>	<b>Date Received</b>
TFA-Unit Investigate	TFA-Unit Investigation Report	Used by Units to request TFA from Department		
	or			
TFA-HR Investigate	TFA-Hospital Representative/ CBOC Deputy Investigation Report	Used by Hospital Representative/CBOC Deputy to request TFA from Department		
TFA-✓	TFA Check Record	When VA&R Chairman receives Investigation Report and if approval is given to dispense funds, she faxes/mails the following TFA Check Record to Department Office		
	Instruction Sheet/Cover Letter	Sent with check		
TFA-Unit Expenditure	TFA-Unit Receipt/Expenditure of Funds	Two (2) copies sent to Unit with check		
	or			
TFA-HR Expenditure	TFA-Hospital Representative/ CBOC Deputy Receipt/Expenditure of Funds	Two (2) copies sent to Hospital Representative/ CBOC Deputy with check		
TFA-Unit Monthly Review	TFA-Unit Monthly Review	Two (2) copies sent to Unit with check		
	or			
TFA-HR Monthly Review	TFA-Hospital Representative/CBOC Deputy Monthly Review	Two (2) copies sent to Hospital Representative/ CBOC Deputy with check		