

Gift Card Reporting Form

Using the chart below, list ALL employees who receive a gift card as an incentive or prize through the Employee Wellness Program. Please list their full name, last 4 digits of their social security number, and the amount they received. ALL gift card incentives must be reported to HR as taxable income.

This form must be signed and returned Caleigh Hill, hillca@pcsb.org every quarter

(10/18, 12/23, 3/10, 5/26).

	Recipient's Name	Last 4 digits of Recipient's Social Security Number	Amount Received	Date Received
1			\$	
2			\$	
3			\$	
4			\$	
5			\$	
6			\$	
7			\$	
8			\$	
9			\$	
10			\$	
11			\$	
12			\$	
13			\$	
14			\$	
15			\$	

Employee Wellness Champion Signature

Date

If you have any questions, please contact Caleigh Hill at hillca@pcsb.org or 588-6031