

Bronxville PTA Elementary Council

Reimbursement of Expenses

THIS FORM MUST BE COMPLETED FULLY WITH RECEIPTS STAPLED
TO A SEPARATE 8.5" X 11" SHEET OF PAPER

REQUEST FOR PAYMENT

Date Requested: _____

Payable to: _____

Address: _____

Phone: _____

Amount: _____ Note: We do not reimburse any sales tax. Due to our not-for-profit status, we should not be charged sales tax. Please use your PTA tax exempt certificate when making purchases.

Date Charge Incurred: _____

Event Description and Date: _____

Council Sub-Committee/Budget Category: _____

Please attach invoices/receipts and place in ES PTA Drawer

In the Elementary School

Or mail to: Bronxville School-Elementary School-PTA

177 Pondfield Rd. Bronxville, NY 10708