

North Syracuse Education Foundation

GRANT EXPENDITURE REIMBURSEMENT FORM

Instructions:

1. Identify the grant for which expenditure reimbursement is requested
2. Itemize each expenditure on the table below (use additional sheets as necessary)
3. Attach receipt(s) or other written documentation of each expenditure
4. Provide name and address of person/organization to receive payment
5. Sign and date the form
6. Return completed form to: NSEF Treasurer
 P.O. Box 5225
 Syracuse, NY 13220-5225

Name of Grant:	
Description of Expenditure	Amount of Expenditure
1.	\$
2.	
3.	
4.	
5.	
TOTAL	
	\$

Name and address of payee: _____

Signature of requestor: _____

Date of request: _____