

Lincoln School Home and School Association
Expense Reimbursement Request

NAME		DATE	
ADDRESS		PHONE	
		COMMITTEE	
E-MAIL			

ITEMIZED EXPENSES (sales tax is not reimbursable)

Vendor / Store Name	Description of Items	Amount
CHECK REQUEST TOTAL:		
MAKE PAYABLE TO:		

Please attach receipts for all listed expenses, have your request signed, and send to the HSA Treasurer.

Committee Chair Signature
OR HSA President/Vice President for committees of ONE person

Date

*****Please have your Committee Chair authorize by signing above BEFORE submitting this to the treasurer.**

Lincoln School HSA Treasurer contact information:
AnnMarie Nieradka
160 Smull Ave
West Caldwell, NJ 07006

Phone: 201-707-2962
E-mail: annmarie.nieradka@ey.com