

North Hills Art Center Expense Reimbursement Form

3432 Babcock Blvd | Pittsburgh, PA 15237
 412-364-3622 | info@northhillsartcenter.org



Name: _____
 Date: _____
 Purpose/Event: _____

Was the NHAC's PA Sales Tax Exemption Certificate Used?
 Yes or No

Itemized Expenses:

Date	Store and Description	Amount
Total Reimbursement		

 Purchaser's Signature

 Approved by

NHAC-Office Use Expense Reimbursement: _____

Total Amount Paid: _____

Check #: _____

Date Paid: _____