



AFT New Jersey
State Federation, AFL-CIO
720 King Georges Road, Suite 300, Fords, NJ 08863
732-661-9393 • www.aftnj.org

Member Social Grant Reimbursement Application

Local/Chapter Title and Number:

Description of the Social Activity:

Amount of Reimbursement Requested:

Date submitted:

Name and address of the person to whom the reimbursement is to be made:

Please note:

- All requests for reimbursement must be accompanied by proof of payment incurred by the local/chapter.
- Application is to be emailed in a Word document to the Divisional EVP:
tardis@aft-local-1796.org

Information below to be completed by authorized AFTNJ leadership

Amount approved:

Authorized by:

Executive Vice President:

Print name, sign and date

President:

Print name, sign and date

Check date:

Check number: