

MUNICIPAL/NON-PROFIT LETTERHEAD

DATE

Ms. Jessie Summers, PLA
Open Space Coordinator
Passaic County Planning & Economic Development
401 Grand Street, Room 417
Paterson, NJ 07505

Re: *Year* Open Space Grant – for *Project Name*

Ms. Summers:

Attached please find a reimbursement request for *Project Year and Name* including invoices in the amount of **\$20,000**, along with associated cancelled checks/borough purchase orders showing payment to the vendor.

This reimbursement request covers the following: *List Items in project scope*. Also included is the Grant Reimbursement Form, reflecting the previous reimbursement(s) – *if any* - and remaining balance.

Please let me know if there are any questions.

Thank you,

Business Administrator/Municipal Clerk