

**Connecticut State Music Teachers Association, Inc Income and Expense Form [www.csmta.org](http://www.csmta.org)**

**\*\*Please submit audition/event expenses within 2 weeks after the event. All requests for **pre-payments** (for judges, etc.) must be received a minimum of 2 weeks prior to the event. All expenses must be submitted before the end of the current Fiscal Year (June 30).**

Your Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

*If any portion of the above expenses should be paid to another party, please indicate the amount and to whom and where the check should be mailed (including address). Attach additional sheets if necessary. To be paid to someone else:*

Amount \$ \_\_\_\_\_ PAY TO:

Amount \$ \_\_\_\_\_ PAY TO:

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

**Send this completed form to:  
Benjamin Steinhardt  
401 Commons Park S, Unit 481  
Stamford, CT 06902**

**IMPORTANT: Receipts (or copies of them) must be attached to this form. Tax will not be reimbursed. Please use the tax exempt forms to purchase items for CSMTA. If you do not have receipts, please briefly explain**

Office Use Only: Date Received \_\_\_\_\_ Date Paid \_\_\_\_\_ Check #(or online billpay) \_\_\_\_\_ rev. 6/2021

