

## 希望中文学校

## **Hope Chinese School**

Request For Expense Reimbursement & Advance Payment

Requestor	(English)(Chi	inese)
Campus	Telephone	
Descrip	tion Amount (Finan	Code ncial Officer se Only)
	Total	
Requestor`s Signature		_
Approved by		_
Approved by		_
	Financial Officer Use Only	
The amount \$ is pa	id to (if other than requestor) of	
	by ( ) cash ( ) check No	
Accountant Signature		