

Portland Chinese School
Expense Reimbursement Form

Description of Expenses		Amount	<i>(For Office Use Only)</i>		
			Budgeted? Yes/No	Account Code	Note
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Total		\$ -			

 Name (English)

 Signature of Applicant

 Date

 Name (Chinese)

Approved by _____

Approved by _____

Check # _____

Date _____

Date _____

Date _____

Received by _____

Date _____