



纽约中部中文学校

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报销单

EXPENSE REPORT

Date	Description	Amount

TOTAL: _____

Requested by: _____ Signature: _____ Date: _____

Home Address: _____

Approved by: _____ Signature: _____ Date: _____

- Note: 1) Please attach all receipts for reimbursement.
2) Please print your name clearly.