



Chinese Music Teachers' Association of Northern California

財物支出申請表 Expense Reimbursement Form

申請日期 Date:

收款者 Pay to :

申請人 Applicant:

電話 Phone :

電話 Phone:

住址 Address :

事由 Reason for : USIMC or CMTANC

(please circle one)

名稱 Items	單價 single price	數量 no	總數含稅 Total (tax include)

TOTAL: _____

**Approved by president: _____ Date: _____

Official Use Only

Pay by _____ Cash \$ _____

_____ Check # _____

經手人簽名:

日期: