

<u>College Station Chinese Bible Church</u>			
Request for Reimbursement			
Date:			
Please list all the expenses below and attach all receipts.			
Your name:		Your phone number:	
Your address (If you want the check mailed to your address):			
Transaction Date	Amount	Expense Category	Purpose of the expenses (e.g., food, hotel, etc.)
Total Amount	\$0.00		
Approved by			