TOASTM	<b>ASTERS</b>		Vouche	r for Reimbursement	墊款請償單		
INTERNATIONAL® B. C. LEST CHE						District number:	67
Date of request 中語口類.				Signatur	· 体 🔿	Paid By 支付方式:	
Requestor/Position held申請人/ 職稱:  Cell Phone Number:					e <u>競子</u>	Beneficiary name 戶名:	Wire Transfer 電 <u>匯</u>
	CCI	Email:				Bank name 銀行名稱:	
						Branch name 分行名稱:	
1. Complete this form. 請填寫此表格。						Bank account 銀行帳號:	
2. Attach organized receipts. Tape receipts smaller than this piece of paper to a				a piece of plain white paper. Multip	le receipts may be		dicate which amount on the
receipt is being requested for reimbursement and note the corresponding number as listed below 請黏貼好收據/發票在別張白紙上。清楚標示出欲申請之金額及其位於下列表格中之對應品項編號。							
3. Return to the District Director (address below). 請郵寄給總會長 (地址如下)。							
4. The District Director reviews, approves, and forwards to the treasurer for payment.總會長核准後,再遞交財務長支付。							
5. Receipts submitted more than 60 days from the date of the expense may be considered unreimbursable.費用發生的收據/發票日期,若超過60天可能無法請償。  ———————————————————————————————————							
	_						財務長塡寫
Line 品項	Month of Expense 費用月份	Currency 幣別	Amount 金額	Expense D (If travel, indicate mile	escription 費用明 age and rate use		Budget Account Number預算科目
1	ļ						
2							
3							
4							
5							
6							
7							
8							
9	ļ						
10							
		Total 合計:		= 台幣	元	,	
Approvals	<b>,</b>						
District Director's name (print): Caroline Kiang 張可芸 District Director's signature:							
Address 地址: 文化路一段366號 Date:							
	Lieutenant Direct	or's name (print):		Lieutenant Directo	or's signature:		LGET or LGM (circle one)
	Treasur	rer's name (Print):	Bishop Hsu			Document number:	
Treasurer's signature:				Date: Date cleared:			