

Center for Chinese Learning at Stony Brook

PO Box 261
E. Setauket, NY 11733

Reimbursement Form

Requested by: _____

Date: _____

Items	Receipt (Y/N)	Amount

Total:

Approved by Principal: _____

Check issued: _____

Notes:

1. If less than \$50, hand it to School Treasurer directly.
2. If more than \$50, need Principal's approval.
3. Any reimbursement without receipt, need Principal's approval.
4. Principal's reimbursement without receipt will be notified to School Board.