柏 拉 阿 圖 中 文 學 校
PALO ALTO CHINESE SCHOOL

MISSING RECEIPT FORM

姓名: English _____ 中文 _____ Date: _____

For teacher only: Class _____ Number of students in class: _____

Description of expenses:

Date	Description	Amount
	Total (must agree with amount above)	

Requester's Signature: _____

Approved By:_____ (校長)