

Claiming Expenses

Date: ____ / ____ / 20____ (DD/MM/YY)

Ref No.: _____

Applicant's Information

Name: _____ Class: _____ Class No.: _____

CHI. ORC. / STRING ORC. / SYM. ORC. / WIND BAND / ACCOM. GROUP / POP MUSIC /

OTHERS (Please specify): _____

| DATE (DD/MM/YYYY) | DESCRIPTION | TOTAL (\$) | REMARKS |
|----------------------|-------------|---------------|---------|
| | | | |
| | | | |
| | | | |
| | | | |

TOTAL: \$ _____

* Please attach the relevant receipt(s) when submitting the form

| | |
|--------------------------------|----------------------------|
| Applicant's Signature : | For office use only |
|--------------------------------|----------------------------|

Reimbursement information:

| | |
|------------------------------|--|
| Financial Secretary : | Applicant's Sign: (after receiving the money) |
|------------------------------|--|

Receipt

REF. NO: _____

Received a request from _____ (_____)

on ____ / ____ / 20____ (DD/MM/YY),

for claiming a total amount of \$ _____ expenses.