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Northern Virginia Experimental Chinese School

Disbursement Request Form-Teacher Expense									
Handling Instructions: Checks distribute day is same as pay day, all requests must allow at least one week of ECS processing time.									
☐ Mail: First class mail, please allow 5 business days of mailing; please provide mailling address, phone number below to process the mailing.									
☐ Pickup: Stop by office before 4:00pm on the Sundays in the 3rd week of each month.									
Make o	Make check payable to: Amounts:								
Mailing Address / phone number: (required if check by mail, first class only,			By completing/signing or approving this disbursement request, you are certifying that: (a) you have reviewed each expense submitted for payment (b) you are familiar with the facts and circumstances relevant to the approval (c) the request for payment and approval comply with all applicable ECS policies Please also refer to ECS Finance rules and regulations posted for all standard and related process.						
Preparer's Signature Date				Approver's Signature			Date		
Prepared by (print name)				Approved by (print name and title (required))			Board	Officer	
Explain purpose of payment. This is required to process your invoice. (Attach original invoice. Backup must show amount to be paid and item descriptions.									
Eynen	Expense	Invoice	_		Purpose (Please be check if they are class material or prize for student)				
Line	Date	Number	Amount	Class	Prize	Details		Notes:	
1				materials					
2								-	
3								-	
4								<u>-</u> 	
5								-	
6								1	
7								<u>-</u> 	
8								-	
9								-	
10								-	
11								-	
12									
13									
14									
15									
16									
17								1	
18								1	
19								1	
20								1	
To	tal							1	
FOR A	FOR ACCOUNTING USE ONLY:								
Vendor Name Payable Check Number		Finance Notes							
Processed By Dat		Date		Entered By / Date Received By / Date / Amount					