

美國胸肺學院 (港澳分會) 有限公司

Reimbursement Form for

Sponsorship to attend Overseas Conference

Dat	e:					
To: Dr. Yiu-cheong Yeung, Secretary Treasurer, CHEST Delegation Hong Kong and Macau						
	C	o Ms. Melissa Man-ching	Leung, Clerical Support, C	HEST Delegation	Hong Kong and Macau	
l ha	ave a	attended (name of confe	rence)		held in (City, Country)	
					I would like to apply for the	
reimbursement of the expenses related				nference from the CHE		
Lim	ited	subject to final discretion o	of the Nomination and Spo	nsorship Committe	ee and the Executive Committee.	
I he	reby	au submit the following docu	ments for the purpose of	reimbursement (pl	ease check all relevant boxes in column A -	
A.		I have NOT received any honoraria / benefits from the Conference Organizer.				
		I have received honoraria	a / benefits from the Confe	rence Organizer. F	Please specify:	
B.		□ I have attached original receipt for return airfare in economic class. HKD				
		I have attached original r	eceipt for hotel accommod	ation of	nights. HKD	
		I have attached original r	eceipt for registration fees	. HKD		
C.		I have attached copy of certificate of attendance.				
	□ Certificate of attendance is not available.					
		□ Reason: □ The	organization does not pro-	vide 🗆 Others: ple	ease specify	
		☐ Letter of self-de	claration of attendance is a	attached		
Tota	al an	nount claimed for reimburs	ement (ie B – A): HKD			
		Please provide bank state places (eg HKD 2,135.17)		nt on conversion o	of foreign currency to HKD, please allow 2	
I de	clare	e that the information state	d above is accurate and tr	ue to the best of n	ny knowledge. Thank you for your attention.	
Bes	t Re	gards,				
Signature		re Account N	Name (in block letters)	——— Maili	ng Address	

The completed reimbursement form should be sent to Ms. Leung Man Ching Melissa by email: chest.melissa@gmail.com or by fax: 2785 3832 within 2 months after attended the conference.