

To: Mr. Yoshihiro Syuto
President
Oriental Life Insurance Cultural Development Center

OLIS 2019 Autumn
Support Request Form for Travel Expenses

I, on behalf of our Company/Organization, understand the purport set forth in the Travel Expenses Support for Seminar Participants and request here to bear full or partial travel expenses for _____ (Name of applicant) to attend OLIS 2019 Autumn.

Company/Organization: _____

Country: _____

Name of Principal Officer: _____

Job Title: _____

Signature: _____ Date: _____

Signer's Email: _____ @ _____

■ Applicant's Job Responsibilities:

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