



Yale University

INVOICE

School of Public Health
Office of Finance and Administration
60 College Street
New Haven, CT 06520

Yanfeng Shi
Capital Medical University

Invoice # COVK-189

Invoice Date 10/04/2019

Due Date 10/18/2019

Description	Unit Price	Quantity	Amount
Reimbursement of costs associated Yanfeng Shi visiting Yale School of Public Health from 09/20/19-03/19/2020			\$2100 USD
CO01...YD000001.CC0935.PG00051.PJ000001.ZZZ1003.FD01..81034. RC170	Subtotal:		\$2100 USD
	Total Amount Paid:		
	Balance Due:		\$2100 USD

Remit to:

Yale School of Public Health
60 College Street
PO Box 208034
New Haven, CT 06520-8034

Wire Instructions:

Bank Name: Bank of America, New York, NY
ABA Number: 026009593 (wire transfers only)
ABA Number: 011900571 (ACH Only)
SWIFT Number: BOFAUS3N
Account Title: Yale University
Account Number: 0050296726
Reference: Yale School of Public Health