



**NHP Wildcat Soccer Club
Travel Team Reimbursement Request Form**

Team: _____
 Coach: _____
 Seasonal Year: _____ Age: U- _____
 Prepared by/Submitted by: _____
 Make Check Payable to: _____
 Address: _____
 City, ST, Zip _____

In order to be considered for reimbursement, the following **MUST** be submitted with this request:

- Volunteer Participation Receipts signed by a Club representative verifying the service hours completed; **AND**
- Proof of Payment: Credit Card statement or Cancelled Check / Bank statement **ONLY**; **AND**
- Receipt for purchase (requests for reimbursement of tournament fees must include a copy of the tournament application)

<u>Store/Vendor</u>	<u>Expense Description</u>	<u>Expense Date</u>	<u>Expense Amount</u>

Date Submitted: _____ Total Expense Amount: _____

Coaches Certification:

I certify that the above expenditures were for legitimate expenses for the _____.

insert team name above

Signed: _____ Date: _____

Coaches signature required

E-mail this form and scanned required documentation to:

Pat Lopez @ plopez4@optonline.net
 Cc: MaryJo Bursig @ mjsbursig@aol.com
 Cc: Kieran Griffin @ kieran@nhpwildcats.org

Reimbursement requests are subject to NHP Wildcats SC Board approval and must conform with reimbursement policies.

<u>For club use only:</u>	
Received by Vice President: _____	Vice President Approval: _____
Reimbursement Level: 1 2 3 4	# of Volunteer Hours: _____ Reimbursement Amount: _____
Check # _____ Check Date: _____	Treasurer Approval: _____

circle one