SPORT CLUB EXPENSE REQUEST

(Choose one per request: invoice payment, member reimbursement, travel)

SPORT_______________________ TREASURER SIGNATURE____________________________________

☐ INVOICE PAYMENT (non-travel)
Vendor NAME: ___________________________________________ AMOUNT TO PAY: $___________
Vendor ADDRESS:________________________________________
Vendor CITY/ST/ZIP:____________________________________
DESCRIPTION OF ITEMS listed on invoice: ________________________________________________

☐ MEMBER REIMBURSEMENT (non-travel)
Receipt #1 Item description ____________________________________________________________ Amount: $___________
Receipt #2 Item description ____________________________________________________________ Amount: $___________
Receipt #3 Item description ____________________________________________________________ Amount: $___________
Member NAME: _______________________________________________ Total reimbursement: $___________
Member ADDRESS:________________________________________
Member CITY/ST/ZIP:____________________________________
Does this include team food expense? If so, list date, time and location food was served: __________________
_________________________________________________________________________________________

☐ TRIP FUNDS
LOCATION:________________________________________________
DEPARTURE DATE: _______/________/_______ RETURN DATE: _______/________/_______

TRANSPORTATION (check all that apply):  PRIVATE CAR ☐ RENTAL ☐ AIR ☐ BUS ☐
1. Do you plan to reimburse a club member for transportation costs? Estimated cost: $________
2. Are you renting cars or vans from Enterprise? Estimated cost: $________
3. Are you contracting a bus and/or airline tickets? Attach invoice: $________
Total transportation: $________

LODGING
Method of payment (choose one): Prepay ☐ Reimbursement ☐ Total lodging: $________
Name of hotel or planned member reimbursee: ____________________________________________
(MUST attach hotel invoice/quote to request prepayment, receipt for member reimbursement)

ENTRY FEES
Method of payment (choose one): Prepay ☐ Reimbursement ☐ Total entry fees: $________
Name of tourney host or planned member reimbursee: ______________________________________
(MUST attach supporting entry form or email invitation for prepayment, receipt for member reimbursement)

TEAM MEALS
Reimbursement only, collect receipts on trip Total team meals $________

Total Trip Cost: = $________