REIMBURSEMENT REQUEST FORM

PROCEDURES

- A. Prior to submitting any AYSO-related expenses or obligations, volunteers should obtain approval from the Area Director.
- B. Expenses to be reimbursed by Area 1N must be submitted on an AYSO Area 1N Reimbursement Request Form (available for download from the Area 1N website) The Expense Reimbursement form must be submitted to the treasurer or Area Director within **60 days** of the date the expense was incurred. All reimbursement requests must have all **original itemized** receipts, invoices, etc. attached to the form. Copies of receipts are not acceptable and expense submission may be returned.

REQUESTED BY:		DATE:			
REGION:		AMT REQUESTED:			
PAYABLI	E TO:				
ADDRES	S:				
CITY, ST	ATE, ZIP				
DATE	DESCRIPTION	P	PURPOSE	SUBTOTAL	CODE (FOR TREASURER USE ONL
	N SUGUER				,
		1, 20	- G 1		
		8 1	1 5		
		8 6			
TOTAL					
Please indicate the purpose of the expenditures so the appropriate account can be charged					
WANTER AND					
I hereby certify that the above is a true and correct statement of expenses incurred by me for Area					
THE ENTER					
Signature Required					
OFFICE USE ONLY					
DATE RECEIVED: CHECK#					
TREASURER SIGNATURE:DATE					

ARE 1N - www.ayso1n.org

AREA DIRECTOR SIGNATURE: ______DATE _____

Providing world class youth soccer programs that enrich children's lives.