REQUEST FOR REIMBURSEMENT / CHECK REQUEST

PACIFIC SWIMMING

FROM:

DATE:

Function (circle)
Registrations
Membership
Sanctions
Records
Publications
Age Group
Camps
Senior
Treasurer
Chair
Outreach
Officials
Board of Review
Coaches
Awards
Secretary
Top 16
Zones
Web/Internet
Convention
Other

Account (circle)	Budget Code	Amount $$$$
Administration		$
Telephone		$
Supplies		$
Repair		$
Computer Service		$
Seminar		$
Fees		$
Internet		$
Other: Describe		
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
Check Total:		$

Remarks / Special Instructions:

Check Payable To: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Attention:

Attach Receipts! **Signature:**

For Treasurer:	Date Received:	Check #:	Date Issued: