



PACIFIC SWIMMING



## Z1S CHECK REQUEST FOR REIMBURSEMENT

DATE:

**REASON** (See instructions below) **AMOUNT**

<b>CO-PAY ASSISTANCE</b>	<b>Swimmer's Name(First,Last):</b>	
	Pacific Coast	
	Western Zones	
	NACC	
<b>COACH'S STIPEND</b>		
	Zone All Stars (Must include a W-9 form. See "Documents" at website for the form.)	
<b>OFFICIALS</b>		
	Background Check (must be certified: level 1, 2, or 3, not trainee)	
	Clinics	
	Officials Chair Meet Supplies	
	Officials Chair Motivational	
<b>Z1S CHAMPS</b>		
	USA Registration (Meet Ref., Head Starter, Admin. Official, Meet Director Only)	
	Meet Expenses	
<b>OFFICE</b>		
	Supplies	
<b>EQUIPMENT</b>		
	Purchase/Repair/Maintenance	
<b>OTHER</b>		
	Reason	

**INSTRUCTIONS:**

CO-PAY: Swimmer's name required. Check made out to parent(s).

COACHES STIPEND: \$100 for the Zone All Star meet only.

Champs USA Registration: Only if not paid by club or Pacific and does not have lifetime registration.

**Remarks/Comments**

(Only if address change or no previous reimbursement request)

**Check Payable to:**

**Address:**

**City:**

**Zip:**

**Email:**

Email form and receipts to:  
mpiccardo@pacswim.org

or mail to:

Z1S Treasurer  
Attn: Mike Piccardo  
1382 Spoonbill Way  
Sunnyvale, CA 94087