**Sports Club Receipt Reimbursement Form**

Club Name:

Destination:

Reason for Departure:

Date & Time of Departure:

Date & Time of Return:

Contact Person:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Expenses** | **Date** | **Place of Purchase** | **Total Amount (on receipt)** | **Reimbursement Amount** |
| **Gas** |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Hotel** |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Entry/Tournament Fees** |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Transportation** |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Other** |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Total Reimbursement Amount:

**Office Use Only**

Date Received: Approved by: Date Approved:

Were legitimate receipts included with this form?