



To be filled out by Coach – Amounts in red are totaled and listed in summary at bottom of form.

All receipts and reimbursements must be in coaches name listed on this form.

PSA Name _____ Sport _____ Coach _____

Only coach listed here may receive reimbursement from this form. Credit card receipts cannot be in anyone's name other than the person being reimbursed.

Address of PSA _____

LODGING

Lodging: On-Campus _____ Off-Campus _____ Location _____

Person(s) Receiving Lodging: _____

Expense by source BTA _____ Trade _____ PSA _____ Coaches Funds _____

Meal Provided (Breakfast, Lunch, Dinner)	Time/Date	Location	Cost enter total cost of meal	Revenue Source Enter amount used from each revenue source		
				Trade	Advance	Coach
Day 1						
Day 2						
Day 3						
TOTALS	Enter sum total for each column					

STUDENT HOST

Attach signed student host receipt

Amount Issued _____ Amount Returned _____ Amount Used _____

Expense by source Coaches Funds _____ Advance _____
(enter amount used from each revenue source)

Name of PSA _____

Sport _____

TRANSPORTATION

Arrival Date: _____ Time: _____ Departure Date: _____ Time: _____

Accompanied by: _____ Relationship: _____

FLIGHT

Attach itinerary and receipt

	From	To	Date	Time
Arrival:	_____	_____	_____	_____
Departure:	_____	_____	_____	_____

Expense by source BTA _____ PSA Reimbursement _____ Coaches Funds _____
(enter amount used from each revenue source)

CAR/MILEAGE

Departure City: _____ Return City: _____

Owner of Automobile: _____ License Plate Number: _____

Mileage reimbursement formula is # of miles * mileage rate
Mileage determined by using Map Quest, which must be attached to this form

of Miles _____ Amount _____

Other _____ Amount _____
(cab, parking, etc.; attach receipts)

Expense by source Advance _____ PSA Reimbursement _____ Coaches Funds _____
(enter amount used from each revenue source)

If you will reimburse prospect by any means other than coaches funds you must attach a completed 204 form and list the amount under revenue as *PSA Reimbursement

Revenue

PSA Reimbursement	_____	204 (Payee Data Record) form must be attached
Coach	_____	
BTA	_____	
Trade	_____	
Advance	Amt Issued _____	PO # _____
Advance	Amt Used _____	
Advance	Amt Remaining _____	Receipt # _____

Total Revenue

Expenses	
Lodging	_____
Meals	_____
Student Host	_____
Transportation	_____

Total Expenses

Coach's Signature: _____ Date: _____

APPROVED: