

# 2008-2009

## RIVER EAST TRANSCONA SCHOOL DIVISION

### Coaches' Expense Requisition

Name: \_\_\_\_\_ School: \_\_\_\_\_

Home Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Team Coached: \_\_\_\_\_ Period from: \_\_\_\_\_ 20\_\_ to 20\_\_

I hereby request reimbursement of expenses, as follows:

**Meals:** Breakfast (out of town trips only) - up to \$5.00 \_\_\_\_\_  
Lunch (weekend Tournament only) - up to \$6.00 \_\_\_\_\_  
Dinner (weekend Tournament only) - up to \$9.00 \_\_\_\_\_

**Meals: Sub Total:** \_\_\_\_\_

**Accommodation:** (attach original receipts) **Accommodation: Sub Total:** \_\_\_\_\_

These meal and accommodation expenses cover the following activities for the period shown.

(Describe fully and specifically, e.g. St. Vital Invitational, October 20, 10:00 a.m. – 9:00 p.m.)

\_\_\_\_ St. Vital Invitational \_\_\_\_\_ October 20, 10:00 a.m. – 9:00 p.m. \_\_\_\_\_

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Mileage:** (attach report) \_\_\_\_\_ kms. X .52 **Mileage: Sub Total:** \_\_\_\_\_

**Total:** (include meals, accommodation and mileage) \_\_\_\_\_

\_\_\_\_\_  
(Coach's Signature)

\_\_\_\_\_  
(Principal's Signature)

\_\_\_\_\_  
**Michelle Williams**  
**Physical Education Consultant**

\* Please provide complete information including all signatures.