

Home School Athletic Association

Pre-Authorization / Reimbursement Request Form

{Please Attach Receipts}

Date of Request: _____
 Submitted By: _____
 Amount Requested: _____
 Approved Budget Expenditure: Yes ____ No ____

Mail To:
 Marci Elkins
 503 Greenwich Lane
 Coppell, Texas 75019

Description of Expenditure: _____

Class Allocation: (Check Only One OR Allocate \$\$ Amounts if Multiple Classes)

- | | | |
|---|---|---|
| <input type="checkbox"/> Baseball 7 th Grade | <input type="checkbox"/> Basketball JV Boys | <input type="checkbox"/> Soccer JV Girls |
| <input type="checkbox"/> Baseball 8 th Grade | <input type="checkbox"/> Basketball JV Girls | <input type="checkbox"/> Soccer Varsity Girls |
| <input type="checkbox"/> Baseball JV | <input type="checkbox"/> Basketball Varsity Boys | <input type="checkbox"/> Volleyball Middle School |
| <input type="checkbox"/> Baseball Varsity | <input type="checkbox"/> Basketball Varsity Girls | <input type="checkbox"/> Volleyball High School |
| <input type="checkbox"/> Basketball 7 th Boys | <input type="checkbox"/> Football Middle School | <input type="checkbox"/> Champions |
| <input type="checkbox"/> Basketball 7 th Girls | <input type="checkbox"/> Football Varsity | <input type="checkbox"/> Spring Banquet |
| <input type="checkbox"/> Basketball 8 th Boys | <input type="checkbox"/> THSSBC BB Tourney | <input type="checkbox"/> Letter Jacket |
| <input type="checkbox"/> Basketball 8 th Girls | <input type="checkbox"/> Other (Explain): | <input type="checkbox"/> Administration |

Allocation Comment: _____

Expense Category: (Check Only One OR Allocate \$\$ Amounts if Multiple Categories)

- | | | |
|--|--|---|
| <input type="checkbox"/> Facility Expense | <input type="checkbox"/> Umpires / Referees | <input type="checkbox"/> Awards / Recog / Gifts |
| <input type="checkbox"/> Training Fees | <input type="checkbox"/> Tournament Entrance Fees | <input type="checkbox"/> Fundraiser Expense |
| <input type="checkbox"/> Uniform Expense | <input type="checkbox"/> National Tournament Fee | <input type="checkbox"/> Miscellaneous |
| <input type="checkbox"/> Uniform – Practice/Caps | <input type="checkbox"/> National Tourn Travel/Other | |
| <input type="checkbox"/> Uniform – Rental | <input type="checkbox"/> Coach Salaries | |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Spirit Wear / Spirit Gear | |

Expense Category Comment: _____

PRE-AUTHORIZATION TO PURCHASE

Sport Commissioner	Date	Treasurer	Date
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AUTHORIZATION TO PAY

(Amounts in Excess of \$3,000 Need the Approval of the Treasurer)

Payee: _____

Payee Address: _____

Phone Number: _____

Amount Paid: _____
 Check Number: _____
 Loaded To QuickBooks: _____

Sport Commissioner	Date	Treasurer	Date
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