



TASO RGV Chapter Basketball Division

Payment Reimbursement



Instructions:

1. Complete one form for each payment or reimbursement you are requesting.
2. Requests must be completed and turned in **no later than 15 days** of the date of the invoice/purchase to allow for an accurate monthly budget report.
3. **Original** invoices and/or receipts must be provided with the completed form.
4. The individual receiving reimbursement may prepare the form and may sign as the "Preparer", but they *may not* be one of the individuals *approving* payment. An individual *may not* prepare *and* sign their *own* reimbursement form.
5. For any reimbursement or payment over \$250, two "Approved signers" signatures are required.
6. "Approved" signers must be those officers listed as Authorized Signers on the chapter account.

Is this a: [Payment to a person] Reimbursement for an expense already incurred.
 [Payment to a vendor] Payment on an invoice.

PAYMENT INFORMATION

Vendor/Person Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Amount: \$ _____

If an invoice: Invoice #: _____ Date: _____

HOW WOULD YOU LIKE TO RECEIVE PAYMENT

U. S. Mail

Pick up

Person picking up check: _____

Date: _____

EXPLANATION OF COST

Event: _____

Location: _____

Purpose of cost: _____

ACCOUNT SIGNER AUTHORIZATION

Prepared by (print name): _____ Date: _____

Approved signer #1 Print name: _____

Signature: _____ Date: _____

Approved signer #2 Print name: _____

Signature: _____ Date: _____