



TEAM REIMBURSEMENT FORM

Today's Date: _____ **Coach Name:** _____

Expense Total: _____ **Team Name:** _____

Purchaser Name: _____ **Reimbursement Total:** _____

Vendor(s): _____ **Date of Purchase:** _____

Items Purchased: _____

Reimbursement requests will only be accepted from the head coach of the team and checks will only be issued to the head coach. It is the head coach's responsibility to issue any refunds to others that may purchase items on their behalf. Any unused team funds will be absorbed by the league at the end of the season.

- Email the completed form to Treasurer@nwgsvegas.com along with the receipts.
- Only one form is needed per week. All expenses can be added each week to a single form.
- **The email "Subject Line" should include the Division AND Team Name.**
- **Include your mailing address with your first reimbursement submission.**

Reimbursement checks will be mailed from Chase Bank once each week. Submissions received by Friday of each week will be processed the following week.

Please contact Jon Farrar at Treasurer@nwgsvegas.com for any additional questions.