

**MC United Coaching Travel Expense Reimbursement Form**

Submit to Treasurer for reimbursement at MCU, PO Box 1071, Wausau, WI 54402. Complete separately for each league match and each tournament weekend

Coach Name: \_\_\_\_\_

Team name, age, and gender: \_\_\_\_\_ (for example, U11G)

Date of submission: \_\_\_\_\_

	(A) Travel miles	(B) = [(A) x \$.14] Travel cost (\$.14/mile)	(C) Hotel room cost (\$125/night max)	(B) + (C) Total Reimbursement
<b>ITEM #1 (Hotel cost documentation required!)</b>				

Travel Dates: \_\_\_\_\_

Tournament or league game? \_\_\_\_\_

If league game, location of match: \_\_\_\_\_

If Tournament, name of tournament and location: \_\_\_\_\_

miles	\$	\$	\$
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	(A) Travel miles	(B) = [(A) x \$.14] Travel cost (\$.14/mile)	(C) Hotel room cost (\$125/night max)	(B) + (C) Total Reimbursement
<b>ITEM #2 (Hotel cost documentation required!)</b>				

Travel Dates: \_\_\_\_\_

Tournament or league game? \_\_\_\_\_

If league game, location of match: \_\_\_\_\_

If Tournament, name of tournament and location: \_\_\_\_\_

miles	\$	\$	\$
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	(A) Travel miles	(B) = [(A) x \$.14] Travel cost (\$.14/mile)	(C) Hotel room cost (\$125/night max)	(B) + (C) Total Reimbursement
<b>ITEM #3 (Hotel cost documentation required!)</b>				

Travel Dates: \_\_\_\_\_

Tournament or league game? \_\_\_\_\_

If league game, location of match: \_\_\_\_\_

If Tournament, name of tournament and location: \_\_\_\_\_

miles	\$	\$	\$
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Note: request for reimbursement for the spring season must be made before the following July 15, and request for reimbursement for fall season must be made before the following November 15. Late submissions will not be reimbursed. Undocumented hotel costs will not be reimbursed. Meals are not reimbursed.