



VOLLEYBALL DIVISION

INVOICE FOR MATCH OFFICIATING SERVICES (UIL Playoffs)

EACH OFFICIAL MUST COMPLETE AND SUBMIT THIS FORM FOR PAYMENT

MATCH LOCATION:		MATCH DATE:	
OFFICIAL'S NAME:		PHONE:	
MAILING ADDRESS:		E-MAIL:	
PHYSICAL ADDRESS:		Last 4-digits SS#	
CITY:		TX	ZIP:
CO-OFFICIAL:			

NOTE TO ACCOUNT PAYABLES: Per UIL 1204: Each Chapter should be paid independently

MATCH FEES – EACH MATCH PER OFFICIAL:

CHAPTER:

		# OF MATCHES	MATCH FEE	TOTAL
PLAYOFFS				
BI-DISTRICT	R1/R2		\$ 70	\$
AREA	R1/R2		\$ 80	\$
QUARTER FINALS	R1/R2		\$ 90	\$
REGIONAL SEMI-FINALS	R1/R2		\$100	\$
REGIONAL FINALS	R1/R2		\$100	\$
LINE JUDGE	Bi-Dist; Area; Quarter Final		\$ 50	\$
LINE JUDGE	Regional Semi; Regional Final		\$ 60	
TOTAL MATCH FEES				

NON - METRO TRAVEL PLAN

<input type="checkbox"/>	1 CAR - _____ MILES @ \$0.540	\$
<input type="checkbox"/>	2 CARS - _____ MILES @ \$0.405	\$
<input type="checkbox"/>	3 CARS - _____ MILES @ \$0.324	\$
<input type="checkbox"/>	RIDER FEE \$10 (ONLY IF 3 CARS ARE PAID)	\$
<input type="checkbox"/>	MEAL REIMBURSEMENT (if distance traveled is greater than 150 miles round trip - \$30)	\$

METRO TRAVEL PLAN

<input type="checkbox"/>	30 MILE RADIUS (0-30)	\$ 15	\$		
<input type="checkbox"/>	40 MILE RADIUS (31-40)	\$ 18	\$		
<input type="checkbox"/>	Greater than 40 M (PORTAL TO PORTAL)	1 CAR MILES@.540	2 CARS MILES@.405	3 CARS MILES@.324	\$
<input type="checkbox"/>	RIDER FEE \$10 (ONLY IF 3 CARS ARE PAID)			\$	
<input type="checkbox"/>	MEAL REIMBURSEMENT (if distance traveled is greater than 150 miles round trip - \$30)			\$	
TOTAL TRAVEL REIMBURSEMENT				\$	

TOTAL DUE OFFICIAL (MATCH FEE + TRAVEL REIMBURSEMENT)	\$
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The match fees and mileage reimbursement listed above are an accurate and true accounting of the payment due for my services.

SIGNATURE OF OFFICIAL _____