AYSA CREDIT CARD Charges And Receipts

Name:_____ **Phone:**_____
Address:_____ **Email**:_____

NOTE: Submit all receipts with this form. Please tape receipts to letter-size sheets of clean paper. Affix to one side only. Use as many sheets as needed to organize the receipts. Be sure to make a copy of this form and your receipts before mailing this.

Mail to: Kay Jones, AYSA Executive Director PO Box 9447, Ketchikan, AK 99901.

Purchase Date	**Item**	Program	**Amount**
		Total	

I Certify that the above expenses were incurred in the best interest of the Alaska Youth Soccer, and an approved budget exists for this expense.

Signature: Date:

Approved By: Date:

INSTRUCTIONS

1. Credit card expenses must be submitted monthly no later than the 10th of the month.
2. Must be legible and in ink.
3. ORIGINAL receipts must be submitted.
4. Identify program or purpose, i.e. ODP, Committee, Workshop, Meetings, etc.