

## COMPENSATION FOR ATHLETIC GAME OFFICIALS FORM

Date of Event		Loc. No Opponent		
		Sport		
Internal Fund check school's Athletic Bus	#, dated siness Manager for payments to athletic g	_, in the amount * of pame officials.	, was issued and give	en to
The following inform	ation is to be completed by the Athletic B	usiness Manager and signe	ed by the game officials receivi	ng payment:
ID Number	Game Official's Name (Printed)	Position Assigne	d Amount Paid	Game Official's Signature
			<b>\$</b>	
			\$	
			\$	
999999	UNDISTRIBUTED CASH (to be returned	d to the Treasurer with this form)		
MSAF RECEIPT #_	TOTAL PAYMENTS FO	OR THIS EVENT *	\$	
I attest that the above indivi Reflected accordingly. Und	iduals have provided officiating services and have been listributed cash, if any, as reflected above, is being retu	given the cash payments med to the treasurer with this form.	Amounts paid, as reflected in tany undistributed cash was re	this form, were entered into MSAF system and deposited.
Athletic Business Manager	 Date		By: School Treasure	er Date