

Official's Payment Voucher

School Name: _____

Date: _____

School Address: _____

Bill-To: _____

Game #	Date & Time	Sport & Level	Site	Home	Away
Football: V / JV / Fresh					

Referee

Name: _____

Address: _____

Phone: _____

Signature: _____

Date: _____

DOB: _____

Game Fee: \$ _____

Perdiem: \$ _____

Travel: \$ _____

Total: \$ _____

Umpire

Name: _____

Address: _____

Phone: _____

Signature: _____

Date: _____

DOB: _____

Game Fee: \$ _____

Perdiem: \$ _____

Travel: \$ _____

Total: \$ _____

Head Linesman

Name: _____

Address: _____

Phone: _____

Signature: _____

Date: _____

DOB: _____

Game Fee: \$ _____

Perdiem: \$ _____

Travel: \$ _____

Total: \$ _____

Back Judge

Name: _____

Address: _____

Phone: _____

Signature: _____

Date: _____

DOB: _____

Game Fee: \$ _____

Perdiem: \$ _____

Travel: \$ _____

Total: \$ _____

Line Judge

Name: _____

Address: _____

Phone: _____

Signature: _____

Date: _____

DOB: _____

Game Fee: \$ _____

Perdiem: \$ _____

Travel: \$ _____

Total: \$ _____

Alternate

Name: _____

Address: _____

Phone: _____

Signature: _____

Date: _____

DOB: _____

Game Fee: \$ _____

Perdiem: \$ _____

Travel: \$ _____

Total: \$ _____

Grand Total: \$ _____

All Contracts are either on file with the assigner or have been accepted electronically.

When employed as an official, that person is an independent contractor, not an employee of the league nor of the schools involved in the event.

Athletic Director