



Dynamo Soccer Clubs of Indianapolis, Inc.

## Referee Advance Reconciliation Form

Must Be Completed and Returned to:

Dynamo Treasurer

P.O. Box 80261

Indianapolis, IN 46280

### Advance Information:

Team:

League:

Manager:

Season:

Advance:

Check #:

*List date, location of game played, name of opponent, # of referees at game, amount paid to the referees on the reverse side of the form. Also list the names of referees when possible.*

### Approval:

**YES**, All games were played and all money advanced was expended for referee payments

Or

**NO**, All money advanced for referee payments was not expended. I am refunding \$ \_\_\_\_\_. Attached:  Check or  Cash

Manager Signature: \_\_\_\_\_

Date: \_\_\_\_\_

