

# EXCEL AQUATICS EXPENSE REPORT FORM

Name: \_\_\_\_\_

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

Meet (Event): \_\_\_\_\_

**Travel Expenses:**

Lodging: \_\_\_\_\_

\$ \_\_\_\_\_

Mileage at \$.585/mile: \_\_\_\_\_

\$ \_\_\_\_\_

Car Rental: \_\_\_\_\_

\$ \_\_\_\_\_

Food: \_\_\_\_\_

\$ \_\_\_\_\_ Clinic Registration

Fee: \_\_\_\_\_ \$ \_\_\_\_\_

Other: \_\_\_\_\_

\$ \_\_\_\_\_

**Printing:** (indicate age group, masters, or swim school)

\_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

**Office Supplies:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\$ \_\_\_\_\_

**Hospitality:** (food, paper products, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\$ \_\_\_\_\_

**Other:**

\_\_\_\_\_  
\_\_\_\_\_  
\$ \_\_\_\_\_

**TOTAL:**

\$ \_\_\_\_\_

**Please staple all receipts to this page:**

\_\_\_\_\_ Mark Walker's initials

Deliver to: Excel Aquatics  
C/O Mark Walker  
920 Heritage Way  
Brentwood, TN 37027