



USA TRACK & FIELD REQUEST FOR PAYMENT

Athlete:

Vendor/Contractor:

Volunteer:

Board/Cmtee (Describe): _____

Coach:

Other (Describe): _____

PLEASE PRINT OR TYPE AND COMPLETE **ALL** PARTS

Payment Type: Check

ACH (Direct Deposit)

****If ACH requested, please attach Bank Instructions****

Make Payment Payable To:

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Reason for Payment Request: _____

(Event, Program, Date, etc.)

- Per Diem \$ _____
- Reimbursement of Expenses (**Receipts must be attached**)
 - Transportation \$ _____
 - Housing \$ _____
 - Meals \$ _____
 - Telephone and Office \$ _____
 - Postage and Printing \$ _____
 - Other _____ \$ _____
- Honoraria \$ _____
(Honoraria payment must be made directly to recipient)
- Payment for Service provided \$ _____
(Payment must be made directly to recipient)
- TOTAL \$ _____

Please remit to your USATF staff liaison _____

For USATF Office Use:

Account Code: _____

W-9 is on File:

Due Date: _____

W-9 is Attached:

Staff Approval: _____

Special Instructions: _____