



USA GYMNASTICS UNIVERSITY NATIONAL INSTRUCTOR FINANCIAL REPORT FORM

Please select course(s) below. All receipts must be submitted for reimbursement.

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|----------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> U101 Safety & Risk Management | <input type="checkbox"/> R102 Preschool Fundamentals |
| <input type="checkbox"/> R103 School Age | <input type="checkbox"/> R301 Brain & Body: Beyond the Basics |
| <input type="checkbox"/> W200 Development Coaches Course | <input type="checkbox"/> T200/201 TT Development Coaches Course |

National Instructor Information			
Name _____	Member Number _____	Course Date _____	
Address _____			
City _____	State _____	Zip Code _____	
Phone _____	Email _____		

EXPENSES (Pre-Approval Required)	
Travel: Mileage (0.545/mile) _____	\$ _____
<i>*Mapquest submission is required for reimbursement</i>	
Hotel _____	\$ _____
Meals _____	\$ _____
<i>*\$25 Max/day</i>	
Postage _____	\$ _____
Other _____	\$ _____
EXPENSE TOTAL	\$ _____

COURSE HONORARIUM	
U101 Safety & Risk Management - \$325	\$ _____
R102 Preschool Fundamentals - \$325	\$ _____
R103 School Age - \$425	\$ _____
R301 Brain & Body: Beyond The Basics - \$325	\$ _____
W200 Development Coaches Course - \$425	\$ _____
T200/201 Development Coaches Course - \$425	\$ _____
T201 ONLY Development Coaches Course (Hot) - \$200	\$ _____
HONORARIUM TOTAL	\$ _____

U101	210-5055-000-760
	210-5020-000-760
	210-5040-000-760
	210-5310-000-760
R102	210-5120-000-760
	210-5055-000-772
	210-5020-000-772
	210-5040-000-772
R103	210-5310-000-772
	210-5120-000-772
	210-5055-000-773
	210-5020-000-773
R301	210-5040-000-773
	210-5310-000-773
	210-5120-000-773
	210-5055-000-770
W200	210-5020-000-770
	210-5040-000-770
	210-5310-000-770
	210-5120-000-770
T200/201	210-5055-000-605
	210-5020-000-605
	210-5040-000-605
	210-5310-000-605
	210-5120-000-605

COURSE FEE TOTAL	\$ _____
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ONSITE PAYMENTS	
Credit Card	\$ _____
Cash	\$ _____
Check	\$ _____
Onsite Totals	\$ _____

PARTICIPANTS	
Pre-Registered	_____
Onsite	_____
No Shows	_____
Total # Participants	_____

BOOKS/HANDOUTS	
Books on hand	_____
Shipment	_____
Books used	_____
Ending Inventory	_____

OFFICE USE ONLY	
Date Received	_____
Total Approved By:	_____