

JUDGING ACCREDITATION TEST ADMINISTRATORS' EXPENSE REPORT FORM



Revised October 2022

***PLEASE RETURN THIS WITH A COPY OF THE COMPUTER-GENERATED ROSTER**

NAME _____ Member ID # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ E-MAIL _____

EXAM DATE _____ EXAM LOCATION _____

ENTER THE NUMBER OF EXAMS GIVEN AT EACH LEVEL

	Level 8	Level 9	Level 10
# OF EXAMS GIVEN			

TOTAL NUMBER OF EXAMS GIVEN _____

Expenses

RECEIPTS MUST BE INCLUDED WHERE APPLICABLE.

Mileage _____ miles X _____ (Current IRS rate) _____ (a copy of printed mileage must be included as a receipt)

Exam Room Rental _____

Copying Expense _____

Mailing (trackable by USPS, UPS, FedEx, etc.) _____

Other (specify) _____

Honorarium _____

(Practical Levels: 1=\$40.00, 2=\$80.00, & 3=\$120.00)

Total Expenses _____

Assistant TA Name _____ TA2 Member ID # _____

(If Needed, check TA handbook)

Mileage _____ miles X _____ (Current IRS rate) _____ (a copy of printed mileage must be included as a receipt)

Honorarium #2 (see TA handbook) _____

Total for Assistant TA _____

RETURN TO:

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