

# IMPACT INSTRUCTOR PAY SHEET

Florida Region of USA Volleyball, Inc.

Instructions: Complete a separate pay sheet for each clinic. Pay sheets will be processed on the 2<sup>nd</sup> and 4<sup>th</sup> Friday of each month. All information below must be completed!



www.FloridaVolleyball.org

INSTRUCTOR NAME: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

SSN: \_\_\_\_\_ TEL: \_\_\_\_\_ E-Mail: \_\_\_\_\_

EVENT DATE: \_\_\_\_\_ # OF ATTENDEES: \_\_\_\_\_

EVENT LOCATION: \_\_\_\_\_

## CLINIC CHECKLIST: (All items below must be completed before payment will be issued!)

- |  |   |
|--|---|
| <input type="checkbox"/> Official IMPACT Clinic Presentation Used    | <input type="checkbox"/> Certificates Issued to All Attendees |
| <input type="checkbox"/> IMPACT Manuals Distributed to Each Attendee | <input type="checkbox"/> Approved Instructor Attire Worn      |
| <input type="checkbox"/> Attendance Roster Enclosed/Attached         | <input type="checkbox"/> Clinic Evaluations Enclosed/Attached |

## PAYMENT INFORMATION:

- |   |    |        |
|---|----|--------|
| <input type="checkbox"/> IMPACT Instructor Fee (Minimum 4hr Course)                                       | \$ | 225.00 |
| <input type="checkbox"/> Lodging Reimbursement (Must be more than 100 miles away and must be preapproved) | \$ | _____  |
| <input type="checkbox"/> Mileage (\$0.55 per mile as of Sep 2011)   | \$ | _____  |
| <input type="checkbox"/> Food/Drink (Max \$5 per attendee, receipt(s) must be attached)                   | \$ | _____  |
| <input type="checkbox"/> Copies/Printing/Supplies (Receipts must be attached)                             | \$ | _____  |
| <input type="checkbox"/> Other (Describe: _____)  | \$ | _____  |

**TOTAL DUE: \$** \_\_\_\_\_

By signing below I agree that all of the information above is accurate and true to best of my knowledge.

IMPACT Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FOR OFFICE USE ONLY:

Amount Paid: \_\_\_\_\_ Ck #: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Initials: \_\_\_\_\_