SUMMIT BOOSTERS ASSOCIATION

Grant Invoice Submission Form For payment of Approved Grant Request

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For payment of Approved Grant Request

Please complete and submit this form using the following procedures:

• Invoice Submission Form must be completed and submitted by the requesting Coach, Trainer or Athletic Director.

• Invoice (not estimate) for the approved Grant Request must accompany the completed form.

• Invoice should not include taxes. Provide the Boosters tax exempt form to the vendor.

• Once grants are approved, there is a 3 month period to turn in the Invoice Submission form. If the invoice submission form is not completed and turned in within 3 months, the grant will no longer be valid and the funds will be placed in the grant fund to redistribute to other grants. If these grant funds are still needed, the coach will have to start the process over.

Please email or mail completed form with invoice to Boosters Treasurer:

Keryn Nomellini 54 Portland Road Summit, NJ 07901 Attn: Boosters Treasurer OR email: <u>shsnjboosters@gmail.com</u>

Name of Team
Name of Requesting Coach/Trainer/AD
Contact information (Email and Phone)
Description of Approved Request
Amount approved by Boosters
Check made out to
Address to mail check

Signature of Coach/Trainer/AD_____