

LOCAL REFEREE ASSIGNOR REPORT FORM

(Subject to change at any time)

This Local Assignor Report Form is to be submitted to National League through **Expensify** by the Local Referee Assignor for payment of Assignor Fees (\$16 per match). Assignor **MUST** have an Expensify account set up through US Youth Soccer; this is the only way reimbursement can happen. This report form should also be emailed directly to the League Manager along with the Seasonal Game Assignments List.

CITY:

LOCAL REFEREE ASSIGNOR INFORMATION

ADDRESS:

STATE, ZIP.		PHONE.	EMAIL.			33N.		
League during the following in form and can b	the season. Your the season of	ou are also requesting ach game assiçum conference we	u assigned below. This sh juired to submit a Seasona gned: names of referees u ebsite. Failure to provide t I address below.	al Game sed (Re	Assignments List feree and AR's) an	(in addition to the	nis document), wit . This is a separat	
SEASON YEAR		STATE PROGRAM & ASSIGNING A		AREA	# OF MATCHES	RATE	TOTAL	
						@\$16/game	\$	
Expense Cod	le: 8065-02-00	7-502						
certify that	the above inf	formation is	true and correct.					
SIGNATURE:			Date	Date:				
		it to Expens	sify <u>AND</u> the approp			listed below		
	League			League Manager				
	Great Lakes Conference & E64 Regional League Great Lakes Midwest Conference & E64 Regional League Midwest				Elliott Spruell <u>espruell@usyouthsoccer.org</u> Bryan Flanagan bflanagan@usyouthsoccer.org			
	Elite 64				Marc Frankland mfrankland@usyouthsoccer.org			
Please allow 4 to receive pay		rocess. A W-9) form on an annual cale	ndar ba	sis must be on fil	le with US Yout	h Soccer in orde	
For US Youth	n Soccer Use	Only						
Approved by:			Date: Date:		US Youth Soccer			
Approval:)ate:					