



Team Requisition Form  
 Union City Youth Soccer League, Inc.  
 PO Box 546 Union City, CA 94587



**Instructions:**

1. All requests must be accompanied by any of the following documentation: receipt, Invoice, Quote, order form, or Print out of cost for item being ordered. No check will be issued without this documentation. Checks will be made out for the amount on the attached document only. No blank checks will be issued
2. Fill out the information below and mail to the league PO Box: Attention: Treasurer, or scan documents and E mail to League Treasurer at [treasurer@ucysl.org](mailto:treasurer@ucysl.org)
3. All Final Invoices should be mailed to the league PO Box, Attention League Treasurer, and must include team number and name.
4. Expense reimbursements for team expenses are made through funds available from sponsorships, Comp. Team Fee's, or sanctioned fundraising efforts. Payments can not be greater than the balance in the account. You can check your account balance by contacting the League Treasurer. The request must be signed by the team's coach or Manager.
4. Depending on the level of the request and completeness of documentation required, please allow for minimum of 10 – 14 days to process your request.

Requisition Date: \_\_\_\_\_ Date funds are required: \_\_\_\_\_

Person requesting payment: \_\_\_\_\_

Amount of Request (attach receipts or backup documentation for the expense):

\$ \_\_\_\_\_

Description of the purchase: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Address and phone number of requester: \_\_\_\_\_

\_\_\_\_\_

Team number and name: \_\_\_\_\_

(Required since many teams have the same name)

Name and address to which the check is to be made out:

\_\_\_\_\_

\_\_\_\_\_

Requester's Signature:

\_\_\_\_\_

Treasurer's Signature

\_\_\_\_\_

Date of Approval \_\_\_\_\_