



## PAYMENT OF REFEREES Sask Volleyball Sanctioned Events

1750 McAra Street  
Regina, Saskatchewan  
S4N 6L4

Tel: 780-9250  
Fax: 780-9288

Name of Event: \_\_\_\_\_ Date: \_\_\_\_\_ Submitted By: \_\_\_\_\_

NAME OF REFEREE	LEVEL	# OF MATCHES 1 REFEREE	# OF MATCHES 2 REFEREE	TOTAL HONORARIUM	10% DEDUCTION	TRAVEL/PHONE ACCOM/ASSIGN	TOTAL PAYMENT	Sask Volleyball CHEQUE #
<b>Assignor:</b>								
<b>Subtotals</b>								
<b>Plus 10% Deduction</b>								
<b>Total Payment</b>								

Please send a copy of the Payment of Referee Form and a cheque for the 10% deduction to the Sask Volleyball within 30 days of the tournament date.