

**CCS FOOTBALL--  
TRAVEL SUBSIDY FORM**

(for teams participating in CCS Play-offs)  
Due no later than 10 days after last game

*California Interscholastic Federation*  
**Central Coast Section**

Governance of H.S. Athletic Programs  
from San Francisco to King City

**SCHOOL NAME** \_\_\_\_\_

**ATTENTION ATHLETIC DIRECTORS:**

- Please complete, sign and submit this form to CCS **no later than 10 days** from the date of your team's last CCS contest. Travel Subsidy Forms received after 10 days from your last date of participation in CCS Play-offs will **NOT** be reimbursed.
- Travel subsidy is approved by the Board of Managers for FOOTBALL, as reflected below.
- **Bus Travel** — If utilizing a bus, per Board policy, it will be reimbursed according to the figures below. If your bus costs more, your school must cover the additional cost. This price is based on the current year's East Side Union High School District's charges.
- Athletic Directors are expected to monitor this subsidy program to insure appropriate, valid expenditures are submitted.
- Duplicate this form as needed.

**GAME #1**

Site: \_\_\_\_\_

Date of Contest \_\_\_\_\_ One Team Bus X \$3.69/mile (round trip) = \$ \_\_\_\_\_ &  
 \$60.83 per hour X \_\_\_\_\_ driver hours = \$ \_\_\_\_\_ &  
 Tape & Miscellaneous Supplies = \$ **150.00**  
**TOTAL DUE FROM CCS FOR THIS GAME** \$ \_\_\_\_\_

**GAME #2**

Site: \_\_\_\_\_

Date of Contest \_\_\_\_\_ One Team Bus X \$3.69/mile (round trip) = \$ \_\_\_\_\_ &  
 \$60.83 per hour X \_\_\_\_\_ driver hours = \$ \_\_\_\_\_ &  
 Tape & Miscellaneous Supplies = \$ **150.00**  
**TOTAL DUE FROM CCS FOR THIS GAME** \$ \_\_\_\_\_

**GAME #3**

Site: \_\_\_\_\_

Date of Contest \_\_\_\_\_ One Team Bus X \$3.69/mile (round trip) = \$ \_\_\_\_\_ &  
 \$60.83 per hour X \_\_\_\_\_ driver hours = \$ \_\_\_\_\_ &  
 Tape & Miscellaneous Supplies = \$ **150.00**  
**TOTAL DUE FROM CCS FOR THIS GAME** \$ \_\_\_\_\_

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

The above information is an accurate accounting of the expenses we incurred and travel subsidy is hereby requested on behalf of my school.

AD Signature \_\_\_\_\_ Date \_\_\_\_\_

**Due no later than 10 days after your school's last CCS contest!**

**LATE REQUESTS WILL NOT BE REIMBURSED!**

CCS FAX # 408-224-0476