

**The University Of Connecticut
Official Visit~Mileage Reimbursement**

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Division Of Athletics U-3078

This form must be submitted to the Business Office 5 days in advance of the PSA's official visit in order for the check to be ready for disbursement when the PSA arrives on campus.

Prospect _____ Sport _____
 Address _____ SSN _____
 _____ Recruiting Coach _____
 High School _____

Mileage Reimbursement in connection
 with an official visit to campus _____.
(dates)

_____ miles X _____ per mile = \$ _____.

Received Payment: _____
(Prospect's Signature)

Amount	Agency	Fund	SID	Object	Function	Activity	FRS	FundSource	Project
7301	6004	000	26__	56	102__	3122__	34		000