

SOUTHEASTERN COLLEGE ASSIGNING (SECA)

**Young Harris Reserves - 3 officials
Game Official's Invoice for Services**

DATE: _____ SITE: _____

GAME: HOME _____ VISITORS _____

MEN: WOMEN:

Official's Name (R): _____ SOC/SEC #: _____

ADDRESS: STREET _____

CITY _____ STATE _____ ZIP _____

GAME FEE: \$ 130.00

Official's Name (AR1): _____ SOC/SEC #: _____

ADDRESS: STREET _____

CITY _____ STATE _____ ZIP _____

GAME FEE: \$ 100.00

Official's Name (AR2): _____ SOC/SEC #: _____

ADDRESS: STREET _____

CITY _____ STATE _____ ZIP _____

GAME FEE: \$ 100.00

Referee Signature: _____

Coach's Signature: _____

- 1) Copy to Home Coach. 2) Copy to School Business Office (within 24 hours) for payment.