ALBERTA FENCING ASSOCIATION
TOURNAMENT OFFICIATING
POST-TOURNAMENT

Tournament Name:

Tournament Dates: **Season:**

AFA REIMBURSEMENT
Completed by AFA Executive Director

Official's Name	Level (P, N, FIE, n/a)	Dates/Times Sat. AM/PM Sun. AM/PM	Events Officiated SMF, U20WE, U17MS, U15WF etc.	PAYMENT	REIMBURSEMENT AMOUNT

Total:
Cheque Number:

OFFICE USE ONLY:

DATE RECEIVED