| Athletic Duty Pay | |
|---|---------------|
| Date | |
| | |
| Name | |
| | |
| My duties as | are |
| completed and I am requesting payment at this time. and uniform inventory have been turned into the Athle | tic Director. |
| | |
| | |
| Signature | |
| · | |
| Principal Signature | |
| | |
| Athletic Director Signature | |
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| | |