



Date: _____

Competition: _____

Judge's Name: _____

Address: _____

Postal Code: _____ Phone # () _____

Day	Date	Start Time	Finish Time	Number of Hours	Fee Per Hour	Set Fee	Total
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

NOTE: Any expenses other than judge's fees must be indicated on a separate Expense Form provided by the Competition Director and must be accompanied with receipts.

GRAND TOTAL

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Judge's Signature: _____

Head Judge's Signature: _____

Competition Director's/Treasurer's Signature: _____