

## Official Visit Reconciliation Form

\*\*To be completed by Coach at the Conclusion of visit\*\*

Prospect Name:			Sport:		
Address:		City/Stat	e/Zip:		
DATE/TIME VIST I	BEGAN://	:	. / <b>PM</b>		
DATE/TIME VISIT	ENDED: / /	: AM	[ / <b>PM</b>		
Student-Athlete Host	Name:		Did host rece	ive money? YES NO	Э
	Time flight arrived		Time flight departed Miami: TO airport:		
Automobile Other (If direct bille	d, please describe):				
<b>Lodging</b> :					
ON CAMPUS	Location:		Dates:		
OFF CAMPUS	Location:		Dates:		
Name:	ners: YES N	Relationship to Pi	•		
Coaches/Athletic Dep Name	oartment Personnel w	Title		Date	<b>-</b>
Non-Athletic Depart	ment Personnel who n	net with prospect:  Title		Date	- - -
	cert, band, movie, etc.)	nts, did the individual(s)?	□ NO Î		-
DATE	ACTIVITY	LOCATION	PERSONS	COST	
				\$	
				\$	



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<u>MEALS:</u> (If needed, attach a typed breakdown of meal attendees and all meals denoted must be accompanied by an itemized receipt for large official visit parties. You must denote cost/location below of all meals.)

DAY 1:	COST:	QUANTITY:	LOCATION:	PERSONS AT MEAL:					
(B'fast)	\$								
(Lunch)	\$								
(Dinner)	\$								
(Snack)	\$								
DAY 2:	COST:	QUANTITY:	LOCATION:	PERSONS AT MEAL:					
(B'fast)	\$								
(Lunch)	\$								
(Dinner)	\$								
(Snack)	\$								
DAY 3:	COST:	QUANTITY:	LOCATION:	PERSONS AT MEAL:					
(B'fast)	\$								
(Lunch)	\$								
(Dinner)	\$								
(Snack)	\$								
Does the quantity of meals ordered match the number of attendees at each meal?   YES   NO									
If no, provide a detailed explanation:									
Was the cost of each meal under \$100 per person?  ☐ YES ☐ NO						□ NO			
Were there any individuals present who paid for their own meal?					☐ YES	□ NO			
If yes, list the individual(s) and their relation to the prospect:									
COMPLIMENTARY ADMISSIONS:									
Were complimentary admissions provided during the official visit?									
If yes, what event were the admissions for?									
By signing below, I confirm that the information provided regarding this official visit is accurate and correct. I acknowledge that all NCAA rules were followed during the official visit, and no inducements or impermissible benefits were provided during the duration of the official visit.									
Signature of Coach:					Date:				