

SPONSOR CHECK FORM

LEAGUE RETAINS THIS PORTION

Date Received: _____

Date Given to League VP: _____

League: _____

Refund Date: _____

Team Name: _____

Refund Check Number: _____

Team Manager: _____

Mail Refund Letter to:

Sponsor Check Number: _____

Sponsor Check Amt.: _____

FILL IN THIS SECTION WHEN REFUND CHECK IS RETURNED TO TEAM MANAGER

Team Manager Signature

Date Received Check

Return this portion to the Manager

Be sure to fill in the Sponsor Information at the top of this form

Date Received: _____

Sponsor Name: _____

Team Name: _____

Sponsor Amount: _____

League: _____

Sponsor Check Number: _____

Team Manager: _____

League Official