

Ocean View Little League Request for Reimbursement

(For use when personal funds have been used to pay OVLL expenses)

Make check payable to: _____

In the amount of: _____

Address: _____

Phone Number: _____

Email Address: _____

Reason for Check:

_____ 41-01 Snack Bar – Food	_____ 41-02 Snack Bar – Merch.	_____ 41-03 Snack Bar – Buyouts
_____ 41-04 Umpire Fees	_____ 42-01/02/03 Uniforms	_____ 43-01 Equipment - Game
_____ 43-02 Equip. - Snack Bar	_____ 43-03 Tents & Canopies	_____ 44-01 Field Maintenance
_____ 45-01 Opening Day	_____ 45-02 Pro Tickets	_____ 45-03 Fund Raising – Photos
_____ 45-09 Fund Raising - Other	_____ 46-01 Player Awards	_____ 46-02 Sponsor Awards
_____ 47-01 Postage	_____ 47-02 Bank Charges	_____ 47-03 Office Supplies
_____ 47-04 Printing Costs	_____ 47-05 Board Mtg Costs	_____ 49-01 Photos
_____ 49-02 Yearbook	_____ 52-01 Trash	_____ 52-02 Porta Potties
_____ 52-03 Storage	_____ 52-04 Telephone	_____ 53-01 Umpire Clinic

_____ Other (Please describe in detail): _____

Summary of Receipts:

Amount:

_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
Total of all receipts:	\$

Approved by: _____

Check payable to: _____

Account number(s): _____

Amount(s): _____

Date of check: _____

Check number: _____

Please note that all reimbursements MUST have an invoice or receipt attached or they may not be honored. All reimbursements must be approved by the President of OVLL.