

**PIAA DISTRICT ONE
BASEBALL / SOFTBALL TOURNAMENT CHECK REQUEST
NO TICKETS SOLD – NEUTRAL SITE**

Please Print – Return within 2 days of Contest

DATE OF GAME: ____ / ____ / ____

PIAA GAME # (on Bracket) _____

SCHOOL REQUESTING CHECKS _____ GAME OPPONENT _____

GAME MANAGER _____ \$ 94.00 CHECK NUMBER _____

SCORE BOARD _____ \$ 54.00 CHECK NUMBER _____

ATHLETIC TRAINER _____ (\$35/HR) CHECK NUMBER _____
(ONLY IF ON SITE)

FIELD PREP _____ \$80.00 CHECK NUMBER _____

ATHLETIC DIRECTOR'S SIGNATURE _____

Please return to: Sean Kelly, Assistant Executive Secretary

E-MAIL: sean@piaad1.org or FAX: 215-933-6108

P.O. Box 925

Doylestown, PA

610.519.9525

Any other expenses must be pre-approved by the Executive Secretary.

A policy has been established to standardize the format by which expenses incurred by schools and individuals would be compensated when hosting a contest for which there was no admission charge. A specific standard voucher was developed for sports that met that description and it will be distributed to schools that hosted such events. The host Athletic Director completes this form and sends it to the person noted on the form for payment.

For District One Use Only

Charge Account: _____ **Date check issued:** ____ / ____ / ____

/ /

Reviewed by Executive Secretary

FORM 201 (A)

PIAA DISTRICT ONE CHAMPIONSHIP CONTEST FINANCIAL REPORT

CHECK DISBURSEMENTS

Please print and complete all information listed

Game Bracket Number: _____ Sport: _____ Date of Contest: ___ / ___ / ___ Site of Contest: _____

PIAA Officials and Game Workers should be listed and sign this form. Official's amount left blank. Use additional sheets as needed.

| | Print Name | Position/Duty | \$ Amount | Mailing Address Print 2 lines | Social Security # Required | Signature |
|----|------------|-------------------------------|------------|----------------------------------|-------------------------------|-----------|
| 1. | | PIAA Officials | PAID BY D1 | | | |
| 2. | | PIAA Officials | PAID BY D1 | | | |
| 3. | | PIAA Officials | PAID BY D1 | | | |
| 4. | | | | | | |
| | | Game Manager | | | | |
| 5. | | Certified Athletic Trainer | | | | |
| 6. | | Score Board | | | | |
| 7. | | Field Prep | | | | |

Completed reports must be submitted to Sean Kelly by email: sean@piaad1.org or fax 215-933-6108