



Check Disbursement Form Tournament Director

Pay to the Order of: _____

Company Payment:

Address: _____

City, State, Zip Code: _____

Individual Payment

Home Address: _____

****This form is due in the CEVA office by noon on the Monday following the tournament***

Line #	Code	Class	Event/Date/Location	Amount
1			<i>Example: 16U PL/ Jan. 7, 2010/ Pacific University</i>	
2	<i>Office</i>			
3	<i>Use Only</i>			

Grand Total: _____

Results

You must write the COMPLETE names of the teams competing on this form (ex: Athena 14 Beta)

	Division:	Division:	Division:
1st			
2nd			
3rd			
4th			
5th			
6th			
7th			
8th			

Comments: _____

Received By: _____

Approved By: _____

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