



Olive Pony Baseball

Expense Voucher Request



Requested By: _____ **Payable to:** _____

Date Requested: _____

Select whether you would like electronic payment with Zelle or a payment by check. Please provide one of the following below to help us quickly process your request.

Zelle Account

(phone number/email linked to account): _____

Address

(check will be mailed): _____

Please provide the following information and attach receipts or other supporting documentation for this request. Requests can be emailed to melissa.trinh@oliveponybaseball.com

Date	Description of Purchase	Amount
		\$
Total		\$

Please indicate the budget line these items should be charged against. Please note that if funds are not available in a team account, the request will not be completed until funds are deposited into the account.

Budget Line (team name or board position)	
Team Manager and division (if applicable)	

Treasurer Use Only

Date Received: _____ **Date Paid:** _____ **Amount:** \$ _____

Zelle Transaction Number: _____ **or Check Number:** _____

Treasurer Signature: _____