WEST HILL BASEBALL LEAGUE
UMPIRE PAY SLIP

Date: _____ (year) (month / day)

No. of Umps at Game: _____

Division: _____

Position (please circle): **BASE** **OR** **PLATE**

Park: _____

_____ **VS** _____ (Teams)

Umpire Jersey # and Name: _____
**Name** (please print clearly)

Notes:

Coach's Name and Signature: _____
Name (please print clearly)

_____
Coach's Signature:

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