**Sponsorship Receipt**

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|  |  |  | AMHA  TEAM NAME HERE |  |
|  |  |  | 2019 - 2020 Season |  |
|  |  |  |  |  |
|  | Received from: |  |  |  |
|  |  |  |  |  |
|  | Amount: |  |  |  |
|  |  |  |  |  |
|  | Date: |  |  |  |
|  |  |  |  |  |
|  | For: |  |  |  |
|  |  |  |  |  |
|  | Receipt #: |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | - Team Manager | | |  |
|  | or |  |  |  |
|  | - Treasurer | | |  |