Officer Change Form Little League Baseball, Incorporated

Little League_® League ID Number A Chartered Member of Little League Baseball. Incorporated

It is important that Little League be advised of your 2011 election results as soon as possible. Updating your election results online or by completion of this paper form is critical.

WE ENCOURAGE YOU TO UPDATE YOUR OFFICERS ONLINE AT OUR DATA CENTER

It's fast and easy - no more officer updates from your league/district web site.

Go to http://www.LittleLeague.org/ and find the Data Center Login on the Right Side • Then login with your ID and Access Code and email address

• Click on "Update Officers" to view and edit listings of your league or district officers

IF YOU MAIL OR FAX THIS FORM

You only need to provide new officers or updated information for the 2011 season. If the officer and his/her contact information are unchanged from last season, simply check the "Same as last year" box. See mail/fax instructions on the last page.

OFFICERS 2011 ELECTION RESULTS

LEAGUE PRESIDENT

| [D # : | |
|--------------------------------|--|
| Name : | |
| E-mail : | |
| Preferred Phone: | |
| Alternate Phone : [–] | |
| Address : | |
| City, State, Zip: | |

LEAGUE INFORMATION OFFICER

| ID #: | | |
|-------------------|--|--|
| Name | | |
| E-mail | | |
| Preferred Phone: | | |
| Alternate Phone: | | |
| Address: | | |
| City, State, Zip: | | |

SAFETY **OFFICER**

| D #: |
|-------------------|
| Name: |
| E-mail: |
| Preferred Phone: |
| Alternate Phone: |
| Address: |
| City, State, Zip: |

CONCESSION MANAGER

| D #: | |
|-------------------|--|
| Jame: | |
| -mail: | |
| referred Phone: | |
| lternate Phone: | |
| ddress: | |
| City, State, Zip: | |

VP BASEBALL

| # | |
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| me: | |
| nail: | |
| eferred Phone: | |
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| y, State, Zip: | |

VP SOFTBALL

UMPIRE-IN-CHIEF

| D #: |
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| Jame: |
| -mail: |
| referred Phone: |
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| Address: |

| D #: |
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| referred Phone: |
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| ity, State, Zip: |

PLAYER AGENT

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TREASURER

| #: | |
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| me: | |
| mail: | |
| eferred Phone: | |
| ternate Phone: | |
| dress: | |
| y, State, Zip: | |

SECRETARY

| ID #: | |
|-------------------|--|
| Name: | |
| E-mail: | |
| Preferred Phone: | |
| Alternate Phone: | |
| Address: | |
| City, State, Zip: | |
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League President or LLO Signature_____

League ID Number_____

Date_____

Please sign and mail this form to:

Little League International 539 Route 15 Highway PO Box 3485 Williamsport, PA 17701-0485 or fax to: 570-322-2376