

Balcones Country Club Women's Association
DEPOSIT Form

Date Submitted: _____ Person Submitting: _____

		Total \$
Cash *		
Checks**	Check # or Total # Enclosed	
Total Deposit		

* Cash Total \$ Verified by: _____
Signature

** Please either list the individual checks by last name on check and the amount of each or provide the total number of checks included and the total \$ value of the checks.

* Check Total \$ Verified by: _____
Signature

CIRCLE THE BUDGET ACCOUNT to be CREDITED:

BCCWA General Fund

- President
- Communications
- Development
- Membership
- Program
- Recording Secretary
- Treasurer
- Other

BCCWA Scholarship Foundation

(No Sales Tax will be reimbursed)

- Chair
- Treasurer
- Meeting Raffles
- Scholarships
- Scholarship Dinner
- Special Events
- Other

Market Days

- Advertising
- Correspondence
- Pantry
- Brochure
- Raffle
- Silent Auction
- Vendors
- Other Committee / Area

Description / Explanation (if needed): _____

Received by: _____
Signature

Print Name

Date: _____