

CARSON COUNTRY USBC

DEPOSIT TRANSMITTAL

TRANSMITTAL # _____

OFFICE USE ONLY

Date _____

Enclosed, please find the following funds:

Coin _____
Currency _____
Quantity of _____ Checks _____
Checks _____
Total Funds Transmitted _____

Please credit the following accounts:

- Accounts –Adult, Youth, Tournament, Fundraiser, Scholarship, Ways n Means, BVL...
- Description-Name & Date of event, if Tournament attach Financial Report, if Scholarship attach Recipient Forms.

Account	ADULT OR YOUTH	Description	Amount
Total amount to be credited to accounts (equals total funds)			

Submitted by:

Name

Committee/Role

Date

Verified by:

Name

Committee/Role

Date

(office use only)

RECEIVED DATE	RECEIVED/PICKED UP @	DATE DEPOSITED
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