

**Encore Club Expense Reimbursement & Check Deposits Form**

DATE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_

COMMITTEE/EVENT \_\_\_\_\_

PURPOSE \_\_\_\_\_

AMOUNT \_\_\_\_\_

PAYABLE TO: \_\_\_\_\_

Please include all receipts and return to Jeanette Bailey, Treasurer

\*\*\*\*\*  
To be filled out by Treasurer

Check number \_\_\_\_\_

Amount \_\_\_\_\_

Date \_\_\_\_\_

Please note if you are running an Event that has checks that need to be deposited also fill out the reverse side.

## Checks Being Deposited Form

Name of Event \_\_\_\_\_

Amount of Deposit \_\_\_\_\_

List of Names on Checks