Waunakee Wrestlebackers Club

Expense/Deposit Form

Purchased/Deposited by:

Name: _____

Date: ____/_____/_____

Expense/Deposit Detail:

Description/Committee/Activity:	Amount:

Total amount of purchase/deposit: $ _____

Please attach proof of purchase/deposit by attaching receipt (s) or deposit slip(s).

Reimbursement required YES or NO (Please circle choice)

Send payment to: _____

_____

_____

Please mail or email this form and receipts to:

Theresa Wilson
C/O Wauankee WrestleBackers Club
1100 Westminster Ct
Waunakee, WI 53597

OR email: waunakeewrestlebackers@gmail.com

This form should be used for ALL deposits and expenses regardless if paid out of pocket or purchased using an account at one of the local merchants. (i.e. Piggly Wiggly) So if you use an account submit this form along with receipt but circle NO for reimbursement. Any Cash for deposit should be given directly to Treasurer. Do not mail Cash.