

SDC TRANSACTION FORM

NAME: _____ DATE: _____

DEPOSIT

I NEED A CHECK

INCOME CATEGORIES

Membership----\$ _____

Mall Show-----\$ _____

In-vette -----\$ _____

Referrals-----\$ _____

50/50-----\$ _____

Misc income----\$ _____

NULL EVENTS

Golf tournament----\$ _____

Vets4pets-----\$ _____

Parades-----\$ _____

AC Bus trip-----\$ _____

_____ \$ _____

EXPENSE CATEGORIES

Newsletter-----\$ _____

Meeting rentals-----\$ _____

Summer meets-----\$ _____

insurance-----\$ _____

Nat corvette museum----\$ _____

Anniv fund-----\$ _____

Donations-----\$ _____

Apparel-----\$ _____

Misc expense-----\$ _____

Christmas party-----\$ _____

TOTAL-----\$ _____

MEMO: _____

Note that the memo field is required, but please be brief

MAKE CHECK PAYABLE TO _____

I WILL PICK UP CHECK AT THE END OF THE MEETING

or

MAIL CHECK TO: _____
