# Oregon Wing Squadron Deposit Advice

-Items with an asterisk (*) are mandatory. If you do not see red borders, click the "Highlight Existing Fields" button at the top right to see the required boxes in red.
-Submit this completed pdf form along with deposit slips, receipts and all supporting deposit information to the Oregon Wing Administrator at makennedy@capnhq.gov.
-All funds will be deposited in accordance with CAPR173-1 and CAPR173-4.
-Funds collected for any activity, including fundraising, must be deposited upon receipt. Funds collected on site must not be used to pay **any** expenses. Expenses for the activity must be paid via check from the unit funds held by wing or paid by the member who must request reimbursement from the unit funds held by the wing.

**Date:** **Date of Deposit:**

**Unit Name:** OR-034 Washington County Composite SQDN

*-Provide a clear and detailed description of funds received. **Contribution:** Are there restrictions? If any, please attach documentation. **Fundraising:** What was the activity - include date and location. **Other Activities:** What was the activity or event - include date and location. **Material & Supply Sale:** Include what items were sold.*

| Received From | Description | Check # or Cash | Amount |
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**Name/Grade of Submitter**

**Total Deposit** $ 0.00