Date: _____ **Event:** _____

To: Brian Jones
Council Treasurer

Attached is money received by me on the behalf of the Gaines KofC Council 12186
I am giving such money to you to deposit in the Council Bank Account

Description:	Amount

For mileage reimbursement, please submitted your request using the activity and/or Expense Report Form

Form Prepared by (print name): _____

Signature: _____

Respectfully,
Brent Cole
Financial Secretary

Total Attached **$0.00**

Deposit Worksheet. xlsx