

# ISQCCBE Revenue/Cash Count Form

The following information must be completed to assure proper accountability of funds.  
 A separate sheet must be completed for each event. Each check must be listed separately below.  
 Please attach deposit slip to form and return to ISQCCBE Treasurer.  
 Membership deposits must be kept separate from show deposits.

Event: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

Classification: _____ All Designated Charities _____ AFSP _____ Cincinnati Leather _____ GLSEN _____ Josephine's Clinic _____ The Cincinnati Sisters _____ Other (Requires ISQCCBE Board Approval)	_____ Membership _____ ICP Ball/Coronation _____ Fire & Ice Scholarship Fund _____ ICS/ICC _____ UpSpring _____ Visionaries + Voices
--	---

Reign 31 preapproved organizations: AVNK, Caracole, Cat Adoption Team and Proud Scholars

Cash/Check	Description	Amount
Cash	\$100 X =	\$
Cash	\$50 X =	\$
Cash	\$20 X =	\$
Cash	\$10 X =	\$
Cash	\$5 X =	\$
Cash	\$2 X =	\$
Cash	\$1 X =	\$
Cash	Coins X =	\$
Other		\$
Membership		\$
<b>Total (from back)</b>		<b>\$</b>

**DEPOSIT TOTAL:**

\$

Show Host Signature(s) \_\_\_\_\_

Designee Signature(s) \_\_\_\_\_

Date Money Deposited: \_\_\_\_\_

Signature of Depositor: \_\_\_\_\_



