



# New York State Organization of Mothers of Twins Club

Founded in 1966

## Financial Transmittal Form

Fiscal Year \_\_\_\_\_

Prepare two [2] copies:

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

- Submit one [1] to your Treasurer with the cash and/or checks
- Retain one [1] for your files

Name: \_\_\_\_\_

Board Position: \_\_\_\_\_

Enclosed:

<u>NAME</u>	<u>AMOUNT</u>	<u>CHECK / CASH/ ZELLE</u>	<u>PURPOSE</u>
		<input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Zelle	
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**TOTALS:**

Cash: \_\_\_\_\_      Checks: \_\_\_\_\_      Total Deposit: \_\_\_\_\_

**SIGNATURES:**

Submitted by: \_\_\_\_\_

Received by: \_\_\_\_\_  
(TREASURER)