ALBANY ATHLETICS BOOSTERS DEPOSIT REQUEST

Date:			Name:			
Contact Info (ph	none or email):					
Check Total:			Cash Total:			
Cash Verified by: Cash			Verified by: Cash Verified by:			
Total Amount of	Deposit:					
Deposit Verified	 l by:					
AAB General F	und Income					
Income Type*			Amount	t Comment / Description		
Corporate Contributions, Sponsorships						
Swag Sales						
Fundraising:Misc I	- undraisers					
Fundraising:Snap-	Raise					
Fundraising:Triath	lon Receipts					
Field Usage Fees						
Other:						
olease submit a se	parate Deposit Requ		for each acco			
Basketball (Boys)	Basketball (Girls)	Cross Country		Flag Football	Soccer	Track & Field
Ultimate Frisbee	Wrestling	Volleyba	ll (Boys)	/olleyball (Girls)	Soccer (Girls)	
Albany High School (AHS)						
Baseball	Basketball (Boys)	Basketball (Girls)		Cheerleading	Cross Country	Football
Golf (Boys)	Golf (Girls)	Soccer (Boys)		Softball	Swimming/Diving	Tennis (Boys)
Tennis (Girls)	Track & Field	Volleyba	II (Boys)	/olleyball (Girls)	Water Polo	Wrestling
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Income Type*			Amount		Comment / Description	
Team Specific- Family Contributions (ETC)						
Fundraising:Misc Fundraisers						
Fundraising:Snap- Fundraising:Team-	<u>-Raise</u> - Concessions, Swag	n and				
Ticket Sales						
Field Usage Fees						
Summer Camp						
Other:						