

# Visual Arts Club Revenue Form

**Return to: Bobbi Weber, 1314 Rowland Drive, 843-838-5958**

Member Name \_\_\_\_\_

Address \_\_\_\_\_

## Revenue:

Membership \_\_\_\_\_ @ \$15.00 = \_\_\_\_\_ Class Type

Class Fees \_\_\_\_\_ @ \_\_\_\_\_ = \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_ = \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_ = \_\_\_\_\_

Donations \_\_\_\_\_

Artwork Sales \_\_\_\_\_

Miscellaneous \_\_\_\_\_ (Please describe)

\_\_\_\_\_

\_\_\_\_\_

Amount: Cash \_\_\_\_\_

Amount: Checks \_\_\_\_\_

Total submitted \_\_\_\_\_

Date submitted \_\_\_\_\_

*Treasurer's Notes*  
*Date Deposited* \_\_\_\_\_