



Idaho Wing Deposit/Disbursement Request



Submit completed form to: admin@idwgcap.org

Unit:

Date:

DEPOSIT

Ck# or Cash	Received From Last Name, First Name	Deposit Information (Description of funds deposited)	Deposit Amount

All funds collected will be deposited. Cash will not be used to pay for expenses. A bank-generated deposit slip & scans of all checks/money orders

must accompany this form and must be submitted to the wing administrator within 7 days of the deposit being made at the bank.

Total Deposit:

WITHDRAWAL

Make check payable to:

Address:

Email:

Phone #:

Itemized Detailed Expense Description(s) Including A/C Tail Number or Vehicle ID

Amount

Attach additional sheet(s) if needed

Total Withdrawal:

All expenses must be documented with detailed receipts that show the vendor name, purchase date & item(s) purchased.

Fuel receipts must also show gallons & price per gallon. Vehicle ID or A/C Tail Number must be written on receipt.

Personal credit card statements or bank statements showing a purchase are not sufficient documentation.

Name & Grade of Requestor (Printed):

APPROVAL(S)

Name Printed:		Signature:		Date:	
Name Printed:		Signature:		Date:	
Name Printed:		Signature:		Date:	
Name Printed:		Signature:		Date:	
Name Printed:		Signature:		Date:	