

CEF Local League Projects

LWVNC, 3509 Haworth Drive, Suite 404, Raleigh, NC 27609

Phone and fax: (919) 783-5995

Local League Deposits

(CEF Form #03)

LWV of _____

Date: _____

Treasurer: _____

Phone: (H) (____) _____

Address: _____

(W) (____) _____

(F) (____) _____

Local League Beginning Balance \$ _____

List and send all individual donor checks.

Name	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Deposited \$ _____

Ending Balance \$ _____