Nampa Composite Squadron
Civil Air Patrol | RMR-ID-015
121 Municipal Drive
Nampa, Idaho 83687

FUNDS VERIFICATION

Form to be completed at beginning and end of each day of fundraising and at any changeover of senior members overseeing such location/event. Form must be completed, signed and initialed in appropriate places by a minimum of two senior members. Return all forms to Squadron Commander.

UNIT: Nampa Squadron RMR-ID-015 DATE: _____

OFFICER IN CHARGE: _____

LOCATION OF FUNDRAISER: _____

DURATION OF EVENT: _____

OPENING BALANCE OF CASH BOX: $_____ Initials: _____ _____

ENDING BALANCE OF CASH BOX: $_____ Initials: _____ _____

Cash: $_____ Checks $_____
Change: $_____

RELEASING OFFICER: _____ DATE: _____

RECEIVING OFFICER : _____ DATE: _____

Acknowledgement and Receipt by Squadron Commander: _____ DATE: _____