



# Archibald Lake Association Deposit or Expense Report



PURPOSE: \_\_\_\_\_

NAME: \_\_\_\_\_

Date	X the appropriate box		Account	Description	Total
	Deposit	Expense			
<b>Total</b>					<b>\$ -</b>

Accounts		
Annual Meeting	Clean Boats/Clean Water	Membership
Apparel Sales	Contingency Fund	Picnic
Archibald Lake Newsletter	Corporate Reporting	Raffle
Association Administration	Education	Signs
Boat Landing Box	EWM Control	Shoreline Restoration
Brat Fry	Insurance	Water Quality
Calendar	Lake Ecology	

Submit deposit form to: [ciskebp@gmail.com](mailto:ciskebp@gmail.com)  
 Submit reimbursement request with receipts to: Bill Ciske, 3130 N. Peach Tree Ln., Appleton, WI 54911