# CLAN DOUGLAS SOCIETY of NORTH AMERICA CDSNA Regent Event Reconciliation REVENUES COLLECTED Form, page 1 of 3

Name of Games:

Date of Games:

Regent's Name:				none Number: ( ) -			
Regent's	s Email Address:						
Use Comments section to explain unusual check items, for example: b. A combined			on paying for another ned check of dues & store goods ned check paying for several members who had paid cash				
Check #	NAME CHECKS ENCLOSED:	Amount  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Comments (a, b, or c)	Instructions ( )			
		\$ \$ \$ \$ \$		(from page 2) (from page 2) (from page 3)	Total New Members Dues Collected \$  Total Renewals Dues Collected \$  Total Store Sales Collected \$		
TOTAL of CHECKS ENCLOSED \$			TC	OTAL COLLECTED \$			

## CDSNA NEW & RENEWAL MEMBERS Form, page 2 of 3

Regent: Game	es: Date of Games:	/ /	
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Revenue Collected should indicate actual DUES PAID only.

All monies from Store Goods should be entered on CDSNA Store Goods Reconciliation Form (page 3)

New Members:			Revenue
Name	Mailing Address	City, State, Zip	Collected
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

Member Renewals:									
Member				Revenue					
Number	Name	Mailing Address	City, State, Zip	Collected					
				\$					
				\$					
				\$					
				\$					
				\$					
				\$					
				\$					
				\$					
				\$					
				\$					

# **CDSNA Store Goods Reconciliation Form, page 3 of 3**

	1			
Name of Games:	Date of Games: /	/		
Regent's Name:	Phone Number: (	) -		
Regent's Email Address:				
Description of Itam		Cina	Overtity	Amount
Description of Item \$7 - Lapel Pin - Belted Heart of Bruce		Size	Quantity	Collected
<u> </u>		_		\$
\$10 - Cookbook - The Douglas Larder				\$
\$20 - A Guide to Douglas Landmarks				\$
\$22 - Cap Badge - Heart of Bruce Pewter (CDSNA Exclusive design)				\$
\$22 - Kilt Pin - Sword-Heart of Bruce Pewter (CDSNA Exclusive design)				\$
OTHER – Please List				\$
OTHER – Please List				\$
\$20 – Women's Winged Heart T-Shirts - Adult S-2X - BLACK Only  S: # shirts	(: # shirts	Indicate # of each size sold at left	Total # of WH T-shirts	\$
\$20 - T-Shirts - Adult S-3X - Blue Only Clan Douglas Front - Belted Heart of B  S: # shirts	ruce Back	Indicate # of each size sold at left	Total # of T-shirts	\$
\$28 - Women's Embroidered Thistle Golf Shirts - Adult S-2X - LIGHT BLUE Only S: # shirts	X: # shirts	Indicate # of each size sold at left	Total # of Women's GS	\$
\$26 - Men's Golf Shirts - Adult - S-3X Embroidered Shield - in Blue (BL) or Green (GR  BL GR BL GR BL GR  S: # shirts =		Indicate # of each size sold at left	Total # of Men's GS	\$
		OTAL COL	LECTED ¢	

## Clan Douglas Society of North America, Ltd.

501(c)(3) organization, EIN: 63-0908133

#### REQUEST FOR REIMBURSEMENT AND/OR CONTRIBUTION ACKNOWLEDGEMENT

Payable/Acknowledgement to: (Please Print)

Regent Name:

I request payment / contribution acknowledgement

for the following expenses incurred on behalf of the

Please mail this form

with copies of all receipts

Regent Name:				Clan Douglas Society of N.A. (receipts attached) to the CDS			CDSN.	A Secretary:	
Address:				SIGN BELOW			Carol J Morton-Bianchini, Secretary		
City, St, Zip:					5.6.1 5226 11			PO Box	
Name of Game:								-	OR 97228 71.300.8593
Date(s) and Location	n: /	/	in				<u>DouglasSe</u>	<u>cretar</u>	<u>/@comcast.net</u>
	COSTS				REIMBURSEMENT				
Game Sponsorship	(tent space)	\$		CDSNA allows for a Number of Ne		Number of New N	/lembers		Amt Collected
Lodging		\$		per event joining at game: reimbursement		e:	<b>→</b>	\$	
Meals		\$			of \$125.00 maximum.				_
Travel ( miles @ \$0.14 / mile) \$		\$			This amount is optional.	Number of N	Members		Amt Collected
Other (describe belo	ow)	\$				renewing dues	S:	<b>→</b>	\$
TOTAL COS	T of GAMES	\$	↓ subtract <b>REIN</b>	1BUR	RSEMENT for Games↓	r		ست	
Reimburseme					iested   \$	CDSNA Acknowledgement and Approval			
CONTRIBUTION \$ (TOTAL COST less requested REIMBURSEMENT)					↓ Additional ↓ ↓ Reimbursements ↓				
(TOTAL COST I	less requested REHVID	CRSEWIENT				Date:	\$_		
Regents Games Kit Shipping Expenses to:					\$	Approved by:			
Officer Expenses:					\$				
Store	e Sales Commission:	Sales: \$	x 10%		\$				
Total Reimburser			al Reimbursem	ent	\$	(Signature of CDSNA Secretary)			
Other Description:	Please provide desc	ription of costs	, expenses, and activities	in wh	ich all expenses were incurr	ed.			