

# VAC

## REVENUE FORM

**Forward to: Treasurer Michael Askew, 1104 Palmetto Point (214-497-7369)**

Member name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Date submitted: \_\_\_\_\_

	Qty		
Single membership	@ \$20	= \$	_____
Family membership	@ \$30	=	_____
Family upgrade	@ \$10	=	_____
Card Club	@ \$25	=	_____
Clay Club	@	=	_____
Class fees	@	=	_____
Other	@	=	_____
Donations			_____
Art entry fee			_____
Artwork sales (sales price x 10% = amount artist pays to VAC)			_____
Miscellaneous (describe)			_____

Total cash		\$	
Total checks		\$	_____
Total submitted		\$	_____

Check payable to and delivered to if different than above: \_\_\_\_\_

Treasurer's Notes

Check #: \_\_\_\_\_ Date paid: \_\_\_\_\_