**Museum of Arts and Sciences**
**GUILD**
**Money Deposit**

| Guild Representative Name | Title |
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| | |

| Full Name | Category | Code | Check # | Cash | Amount |
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| | | | | Total Checks | $ |
| | | | | Total Cash | $ |
| | | | | Grand Total | $ |

| Received – Museum Representative | Title | Date |
|---|---|---|
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***Note: Treasurer must be sent signed copy of form.***