Date Submitted Originally	

ACTIVITY/MEETING ROOM REQUEST FORM

TO SEPO BOARD: (I / WE)		wo	OULD LIKE TO RESERVE
(Circle Area) If you are having an ever	nt and then a dinner eto	, please fill out a <u>separa</u>	ate form for each.
RETZLAFF HALL / PAVILLION / POOL CARD ROOM / BILLIARDS ROOM / V	·	•	
FOR THE FOLLOWING TYPE (Please C SUNSHINE ACTIVITY/MTG PRIVATE PARTY PLEASE DE	PLEASE DESCRIBE		
DATE OF ACTIVITY/MEETING			
TIME OF ACTIVITY/MEETING			
NUMBER OF PEOPLE TO SETUP FOR (if applicable)		
WILL YOU NEED TO USE? KITCHEN	SOUND SYSTEM	MEDIA SYSTEM	STAGE
I/We understand and agree that all on SEPO meetings, Women's Club Activit	• •	•	
I/We further understand that if multi if my/ours changes from the other ev		eekend, I/we will be res	ponsible for any setup
I/We also understand that we are res taking out trash, wiping off tables, tur up sound system (if used) and locking lock the building after a daytime mee	rning off all lights and fa the building when the	ns, turning off media sy	stem (if used), locking
Signed	Phone #	Date	
Approved By		Date	
Date resubmitted			
Approved By		Date	

Any Special Instructions for this request?

- Please allow time, in your request date(s), for setup and refrigerator use.
- Attach drawing if other than normal setup is required for the area you are requesting.

Women's Club Activity: Party/Event Name Goes Here

Activity Date: Month Day, Year

Committee Members:

NAME	Phone #1	Phone#2	Email Address	Sunshine Address	Responsibilities
Co-Chair Name Goes Here					
Co-Chair Name Goes Here					

(Form Revised: Jan 22, 2018)

Women's Club Activity:

Activity Date:

Committee Members:

Phone #1 Phone#2 Email Address	Salisinie Addiess	Responsibilities

SUNSHINE COUNTRY CLUB ESTATES WOMEN'S CLUB

Activity Income / Expense Report

(This statement to be turned in to the Women's Club Treasurer no later than 5 days after event.)

EVENT:			DATE:			 	
Chairperson((s):			Report F	Prepared By: _		
D	ESCRIF	PTION		ı	NCOME	EX	PENSE
INCOME:							
ADVANCE	:						
				_			
				_			
				_			
EXPENSES:	<u>.</u>						
				_			
				_			
				_			
				_			
				_			
				_			
				_			
******	******	*******	****	*****	******	*****	*****
	SECTION WH		*		FINAL TOTA	LS	
	Y PRIOR TO T	1	*		INCOME:	\$	
Date	Amount	Received By	*	Minus			
			*	PRO	FIT (LOSS):	\$	
			*				
			*				
			*		by:		
		1	*	Received I	hv.		

SUNSHINE COUNTRY CLUB ESTATES WOMEN'S CLUB

Committee Receipt Reimbursement Report

(This statement to be attached to the Income/Expense Report and turned in to the Women's Club Treasurer no later than 5 days after event.)

Event:		Date:	
		Total:	
Purchase [signed receipt(s) as			A
Reason for Purchase / Where	e Purchased:		Amount:
Approved by:			
	Committee Treasurer		
Evnance Deimbergerd to			
Expenses Reimbursed to:	Committee Member v	with Eynansa	·c
	Committee Wember V	vitii Lxpeiise	J
Date Expenses Reimbursed:			

FAREWELL PARTY - MARCH 22, 5 PM

SIGN-UP SHEET







Any Checks Should Be Payable To: SCCE Women's Club

NAME	#	Amt PAID: Chk# OR Cash	NAME	#	Amt PAID: Chk# OR Cash
	1			20	
	2			21	
~	3	100		22	
	4			23	
	5			24	- Mintella XVIII
TARREST TO THE PARTY OF THE PAR	6	12		25	
	7	1		26	
	8 .	1		27	
	9			28	
	10			29	
The relation of the second sec	11			30	
	12			31	
	13			32	
	14			33	
	15			34	
	16			35	
	17			36	
	18			37	
	19			38	

#	NAME	PAID	#	NAME	PAID
1			21		
2			22		
3			23		
4			24		
5			25		
6			26		
7			27		
8			28		
9			29		
10			30		
11			31		
12			32		
13			33		
14			34		
15			35		
16			36		
17			37		
18			38		
19			39		
20			40		

New Homeowners Party (January 13, 2017) Attendees Checkoff List

Here	Last Name	First Names	Count	 Here	First Names	Count
	Allen	Kate	1			
	Anderson	Judy	1			
	Bates	Cathy & Jim	2			
	Busch	Bob & Mary	2			
	Billings	Jim	1			
	Compton	George	1			
						\sqcup
						\sqcup