OREGON LIBRARY ASSOCIATION DEPOSIT FORM	
Date:	
Name:	
Address:	
Phone Number:	
Committee:	
Budget Line to be used for deposit:	
Memo (For OLA Financial Reports):	
Total Deposit:	
Please include copy of top portion of form with de	eposit
Memo (Description)	Amount
Total	\$
Submit to:	
Shirley Roberts	Questions or Problems:
Oregon Library Association	Stephanie Lind
PO Box 3067	OLA Treasurer
La Grande OR 97850	Washington Cty Co-op Library Services
Phone: (541) 962-5824	Phone: (503) 681-5090
Fax: (541) 962-3335	stephaniel@wccls.org
sroberts.ola@gmail.com	