

Deposit Receipt



Date: _____

Amount: _____

Person making Deposit: (Print) _____

(Signature): _____

Budget Category to be Credited: _____
(ex. Harvest Festival)

Name of Counter #1 (Print): _____

(Signature): _____

Name of Counter #2 (Print): _____

(Signature): _____

Counter #1	Sub-Totals
Coins	
1s	
5s	
10s	
20s	
50s	
100s	
Total Cash	
# of Checks	
\$ in Checks	
TOTAL	

Counter #2	Sub-Totals
Coins	
1s	
5s	
10s	
20s	
50s	
100s	
Total Cash	
# of Checks	
\$ in Checks	
TOTAL	

Space is provided to record individual checks on back

****Make a copy of this form for your records and give the original to the Treasurer.****

DO NOT PLACE MONEY IN THE OPEN MAILBOX IN THE OFFICE

All monies should be either given directly to the Treasurer or placed in the locked mailbox on the PTA closet door. Please inform Treasurer that a deposit is waiting.