

Deposit/Funds Receipt

Please submit this form with any money passed to the Treasurer. Per insurance requirements TWO PTA members must count the money, sign this form, and turn in with funds.

Date: _____

Program (Committee/Events) or Project (Dept.): _____

PTA Member Signature 1: _____ (Insurance Requirement)

Name: _____ **Phone:** _____

PTA Member Signature 2: _____ (Insurance Requirement)

Name: _____ **Phone:** _____

<p>CURRENCY COUNT:</p> <p>_____ x \$100's = _____</p> <p>_____ x \$50's = _____</p> <p>_____ x \$20's = _____</p> <p>_____ x \$10's = _____</p> <p>_____ x \$5's = _____</p> <p>_____ x \$2's = _____</p> <p>_____ x \$1's = _____</p> <p>TOTAL CURRENCY = _____</p>	<p>COINS COUNT:</p> <p>_____ x Dollar Coins = _____</p> <p>_____ x Half Dollars = _____</p> <p>_____ x Quarters = _____</p> <p>_____ x Dimes = _____</p> <p>_____ x Nickels = _____</p> <p>_____ x Pennies = _____</p> <p>TOTAL COINS = _____</p>
SUB-TOTAL CASH = _\$ _____ (Currency + Coins)	
SUB-TOTAL CHECKS = _\$ _____ # OF CHECKS = _____	
TOTAL FUNDS TO DEPOSIT = _\$ _____ (Cash + Checks)	

Questions? Contact PTA Treasurer

Email: sacpta@yahoo.com **Website:** sacpta.yolasite.com **Facebook:** www.facebook.com/Sacajawea.Elementary.PTA

FOR PTA TREASURER USE ONLY: Date Form Received _____

Verified by Treasurer - Budget Category Applied: _____

Logged into Quicken Ledger

“STAPLE BANK DEPOSIT SLIP HERE”