

Cash Box Reconciliation Form & Deposit Receipt

Please submit this form with any cash box money passed to the treasurer. Per insurance requirements TWO PTA MEMBERS must count the money, sign this form, and turn in with funds (currency, coins, & checks). A copy with bank deposit receipt will be provided by the treasurer to be filed in appropriate pass down binder.

Check Payee to Complete:	Event Date	Check #	Cash box #	of	Amount \$
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Initial Cash Box Count

Total Bills \$50+ = _____

_____ X \$20 = _____

_____ X \$10 = _____

_____ X \$5 = _____

_____ X \$1 = _____

_____ X \$.50 = _____

_____ X \$.25 = _____

_____ X \$.10 = _____

_____ X \$.05 = _____

_____ X \$.01 = _____

TOTAL = _____

Counted by: (Both members sign & date.)

1 _____

2 _____

Questions? Contact PTA Treasurer:

Final Cash Box Count

Total Bills \$50+ = _____

_____ X \$20 = _____

_____ X \$10 = _____

_____ X \$5 = _____

_____ X \$1 = _____

_____ X \$.50 = _____

_____ X \$.25 = _____

_____ X \$.10 = _____

_____ X \$.05 = _____

_____ X \$.01 = _____

of Checks _____ Total = _____

TOTAL for DEPOSIT = _____

Counted by: (Both members sign & date)

1 _____

2 _____

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

For PTA Treasurer Use:

Check # _____ (attach copy of this form to original Expense Report)

Date Received _____

Date Logged into Accounting Software _____

Budget Category Applied (Cash Box Funds Return \$ _____)

Budget Category(ies) Applied (Remaining Funds \$ _____)

Attach Bank Deposit Receipt to back of this form.