

2007-2008

Ralph R. Smith PTA

Deposit Notice

Your Name _____ Phone _____

Date Submitted _____

Event _____

Budget Category _____

Total Amount \$ _____

Specific Description of Source (e.g., payments for ice cream)

Complete the following information for your deposit:

Cash	Checks
\$20 x _____ = _____.	Number of Checks _____ Total Checks \$ _____
\$10 x _____ = _____.	
\$ 5 x _____ = _____.	
\$ 1 x _____ = _____.	
.25 x _____ = _____.	
.10 x _____ = _____.	
.05 x _____ = _____.	
.01 x _____ = _____.	
Total Cash \$ _____	

Accepted by (PTO Treasurer) _____ Date _____

For Treasurer's Use Only

Category _____ Transaction ID _____ Deposit Date _____ Logged _____