

**2007-2008**  
**Ralph R. Smith PTA**  
**Income Record**

Your Name \_\_\_\_\_ Phone \_\_\_\_\_

Date Submitted \_\_\_\_\_

Event \_\_\_\_\_

Budget Category \_\_\_\_\_

Brief description of deposit \_\_\_\_\_

\_\_\_\_\_

Chairperson deposit form completed and attached \_\_\_\_\_

Deposit Slip Attached YES NO (circle one) If no receipts please explain below

\_\_\_\_\_

Total Deposited \$ \_\_\_\_\_ Deposit date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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For Treasurer's Use Only

Category \_\_\_\_\_ Dated \_\_\_\_\_ Logged \_\_\_\_\_