

Deposit Form

Deposit Presented By: _____ (please print)

Phone #: _____ Email: _____

Deposit Amount: \$ _____ Date Submitted: _____

Budget Line Item (Required): _____

Please do not use this form for more than one Budget Line Item

Explanation: _____

Number of Checks: _____ Amount of Checks: \$ _____

Paper Currency			Coins		
#	\$ 100s	\$	#	dollar coins	\$
#	\$ 50s	\$	#	half dollars	\$
#	\$ 20s	\$	#	quarters	\$
#	\$ 10s	\$	#	dimes	\$
#	\$ 5s	\$	#	nickels	\$
#	\$ 1s	\$	#	pennies	\$
#	Other	\$	#	other	\$
Total		\$	Total		\$

Signature of Presenter: _____ Date: _____

Leave deposits in the Treasurer's box at school. Please contact the Treasurer, Nancy Nunan, at Cavancork@aol.com with any questions. The person filling out this form is responsible for the funds listed until they are received by the Treasurer.

Treasurer's Use Only

Receipt Date: _____ *Deposit Date:* _____ *Amount:* \$ _____