

Franklin PTA Deposit Form



Date: _____

Committee: _____

Event/Budget line: _____

Submitted by: _____

CASH COUNT		
	Qty	Amount
Other	_____	\$ _____
\$50 bills	_____	\$ _____
\$20 bills	_____	\$ _____
\$10 bills	_____	\$ _____
\$5 bills	_____	\$ _____
\$1 bills	_____	\$ _____
Quarters	_____	\$ _____
Dimes	_____	\$ _____
Nickels	_____	\$ _____
Pennies	_____	\$ _____
TOTAL CASH	_____	\$ _____

CHECK LISTING		
-or-		
<input type="checkbox"/> See Attached Listing		
#	Last Name	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
# _____	TOTAL CHECKS:	\$ _____

TOTAL CASH	:		+	
TOTAL CHECK	:			
TOTAL BANK DEPOSIT	:		\$	

Counted by : _____

2nd Counter for cash : _____

Board Member / Committee Chair

Date rcvd by Treasurer: _____

Treasurer's Signature: _____