

Request for Deposit Form

(To be used when giving funds to Treasurer)



Event _____

Date _____

Person completing form _____

Phone No. _____

| Budget Areas Impacted | Amount | Chairperson Signature |
|-----------------------|--------|-----------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

(Please make sure that there are always 2 people counting money to protect the reliability of the count)

Total of Checks \$ _____

Total of PayPal \$ _____

| Bills | # | Amount |
|--------------|---|--------|
| \$100 | | |
| \$50 | | |
| \$20 | | |
| \$10 | | |
| \$5 | | |
| \$2 | | |
| \$1 | | |
| Total | | |

| Coins | # | Amount |
|--------------|---|--------|
| Dollar | | |
| 50 Cent | | |
| Quarters | | |
| Dimes | | |
| Nickels | | |
| Pennies | | |
| Total | | |

Total Cash \$ _____

Total Deposit \$ _____

Counter's Signature _____

Counter's Signature _____ Date _____

Received by Treasurer _____ Date _____

(When turning in a deposit, please allow time for another count of the total deposit so a receipt can be given to the person turning in the deposit)

