

CCMS PTO DEPOSIT FORM

Date Submitted _____

Person Submitting _____ Phone # _____

Project _____

Description & Date of Project _____

Please do not include any cash that was in the cash box when you received it. CONTACT THE TREASURER IF YOU HAVE ANY QUESTIONS. If more space is need to list checks, please use a 2nd form.

CASH	Quantity	Total
\$100 x		= \$
\$50 x		= \$
\$20 x		= \$
\$10 x		= \$
\$5 x		= \$
\$1 x		= \$
TOTAL		= \$

COINS	Quantity	Total
\$1 x		= \$
\$.50 x		= \$
\$.25 x		= \$
\$.10 x		= \$
\$.05 x		= \$
\$.01 x		= \$
TOTAL		= \$

Check #	Amount	Check #	Amount
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
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	\$		\$
	\$		\$
	\$		\$
	\$		\$

CHECK TOTAL: **= \$** _____

GRAND TOTAL OF DEPOSIT:	\$
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Accepted by (PTO Treasurer) _____ Date _____

For Treasurer's Use Only

Date Deposited _____ Date Logged _____