

Belle Aire PTA Deposit Voucher

(To be used when giving funds to Treasurer)

Event: _____

Date of event: _____

Please Turn in all Monies within 24 hours of Event

Account(s) to be applied:

Account Name: _____

\$ _____

Account Name: _____

\$ _____

Account Name: _____

\$ _____

TOTAL DEPOSIT:

\$ _____

Chairperson: _____

Phone#: _____

Person Completing Form: _____

Phone#: _____

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

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

Total Bills:

\$ _____

Coins	#	Amount
Dollar		
50 Cent		
Quarters		
Dimes		
Nickels		
Pennies		
Total		

Total Coins:

\$ _____

Total Cash:

\$ _____

List Checks on Back

Total Checks:

\$ _____

TOTAL DEPOSIT:

\$ _____

Counter's Signature: _____

Date: _____

Counter's Signature: _____

Date: _____

Received by Treasurer: _____

Date: _____

Check #	Last Name	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
29		
30		
Total Checks:		\$

Please make copies of this page if additional lines are needed