

Deposit Notice



West Newbury PTO

YOUR NAME:		EMAIL:	
PROJECT/CATEGORY:			
DATE SUBMITTED:		TOTAL DEPOSIT AMOUNT:	
		\$	
SPECIFIC DESCRIPTION OF SOURCE (e.g., payments for ice cream):			

Please complete the following information for your deposit, attach additional paper if necessary:

CASH	QTY	TOTAL	CHECK #	CHECK AMT
\$ 50.00				
\$ 20.00				
\$ 10.00				
\$ 5.00				
\$ 1.00				
\$ 0.25				
\$ 0.10				
\$ 0.05				
\$ 0.01				
TOTAL CASH:			TOTAL CHECKS:	

ACCEPTED BY (TREASURER):	DATE:

FOR TREASURER'S USE ONLY: Category _____ Deposit date _____ Logged _____