

Rose Hill PTC

Deposit Notice

Your Name _____ Phone _____

Date Submitted _____

Money Collected for, please be specific:

Total Amount \$ _____

Complete the following information for your deposit

Cash	Checks <i>(Do not write each check, unless only a few, attach calc.tape)</i>
\$20 x _____ = _____	
\$10 x _____ = _____	
\$ 5 x _____ = _____	
\$ 1 x _____ = _____	
.25 x _____ = _____	
.10 x _____ = _____	
.05 x _____ = _____	
.01 x _____ = _____	
Total Cash \$ _____	Number of Checks _____
	Total Checks \$ _____

Your Signature _____ Date _____

Accepted by (PTO Treasurer) _____ Date _____

For Treasurer's Use Only

Account _____ Transaction ID _____ Deposit Date _____ Logged _____
