

DEPOSIT FORM

	Name	Date
	Name on Check	Check # \$
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.	_____	_____
31.	_____	_____
32.	_____	_____
33.	_____	_____
34.	_____	_____
35.	_____	_____

Cash Summary:

\$1 X _____ = _____

\$2 X _____ = _____

\$5 X _____ = _____

\$10 X _____ = _____

\$20 X _____ = _____

\$50 X _____ = _____

\$100 X _____ = _____

TOTAL = _____

Coin Summary:

1¢ X _____ = _____

5¢ X _____ = _____

10¢ X _____ = _____

25¢ X _____ = _____

50¢ X _____ = _____

1.00¢ X _____ = _____

TOTAL = _____

Total # of Checks: _____
Count the actual checks to catch any overlooked checks.

Deposit Totals

Checks: \$ _____

Cash: \$ _____

Coins: \$ _____

Total: \$ _____

<u>Budget Items to be Credited</u>	<u>\$ Amount</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Executive Board Member Signature

Second Signature for Cash Deposits

For Treasurer's Use Only

Dep Date: _____ Amount: _____

Entered into Ledger/Accounting Software