

# Deposit Notice for DVMS Spartan Boosters Inc.

DEPOSITOR NAME:	PHONE:
<b>CATEGORY: (Circle/Highlight Applicable Committee) Fannie May Concessions Spiritwear Box Tops</b> Donations Staff Appreciation Other _____	
Parents' Club Miscellaneous: _____	
Date Submitted:	Total Amount:
Specific Description of Source: (e.g. income from concessions, which game)	

**Complete the following information for your Deposit:**

CASH	QUANTITY	TOTAL	CHECK NUMBER	CHECK AMOUNT
\$20.00				
\$10.00				
\$5.00				
\$1.00				
\$0.25				
\$0.10				
\$0.05				
\$0.01				
TOTAL CASH: \$			TOTAL CHECKS: \$	

ACCEPTED BY (PARENTS' CLUB TREASURER):	DATE:
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