

LOS ALAMITOS UNIFIED SCHOOL DISTRICT
SUMMARY OF DEPOSIT

School Site/Department: _____ Date: _____

Depositor's Name: _____ Position: _____

Account #: _____

Purpose of Funds Received: _____

CURRENCY:

_____ 100's = _____
_____ 50's = _____
_____ 20's = _____
_____ 10's = _____
_____ 5's = _____
_____ 1's = _____

COINS:

_____ 1.00's = _____
_____ .50's = _____
_____ .25's = _____
_____ .10's = _____
_____ .05's = _____
_____ .01's = _____

TOTAL CURRENCY: \$ _____

TOTAL COINS: \$ _____

TOTAL CHECKS: \$ _____

GRAND TOTAL \$ _____

FOR SITE/DEPARTMENT

Deposited by: _____

Verified by: _____ Date: _____

Note: For audit purposes, please attach necessary documents to back up the deposit (e.g. worksheet or list of names of students with corresponding amount collected)

FOR BUSINESS OFFICE ONLY

Receipt #: _____ Date: _____ Verified by: _____