

SHS PTA Deposit Form for Collected PTA Funds

Please complete the form below, and place with the funds in a sealed envelope and contact the Co-Treasurer (Monika Lazaro, 7 Sugar Maple Lane, monika.lazaro5@gmail.com, 914-318-5719) to arrange timely delivery.

Name: _____

Contact Info: _____

SHS PTA Event/Activity: _____

Date: _____

ITEMIZED DEPOSIT:

CASH:

\$1's _____ \$5's _____ \$10's _____ \$20's _____ \$50's _____ Other\$ _____

Total Cash: \$ _____

CHECKS: (attach spreadsheet if more than 7 checks)

Check # _____ Payer _____ Check amount \$ _____

Check # _____ Payer _____ Check amount \$ _____

Check # _____ Payer _____ Check amount \$ _____

Check # _____ Payer _____ Check amount \$ _____

Check # _____ Payer _____ Check amount \$ _____

Check # _____ Payer _____ Check amount \$ _____

Check # _____ Payer _____ Check amount \$ _____

Total Checks: \$ _____

Total Deposit: \$ _____

2019-2020