

AFA Deposit Form

Event/Committee: _____ Name: _____

Email: _____ Date: _____ Date of Event: _____

Coin: \$ _____

Currency: \$ _____

Total Cash: \$ _____

Total Checks: \$ _____ Number of Checks: _____

Total Deposit: \$ _____

Less Original

Cash Box Amount: \$ _____

Net Deposit: \$ _____

Deposit counted by: _____

Deposit verified by: _____

Keep this copy for your committee notebook

AFA Deposit Form

Event/Committee: _____ Name: _____

Email: _____ Date: _____ Date of Event: _____

Coin: \$ _____

Currency: \$ _____

Total Cash: \$ _____

Total Checks: \$ _____ Number of Checks: _____

Total Deposit: \$ _____

Less Original

Cash Box Amount: \$ _____

Net Deposit: \$ _____

Deposit counted by: _____

Deposit verified by: _____

Treasurer's Copy