

ROUTING SEQUENCE	
<input type="checkbox"/>	Mimi Southard
<input type="checkbox"/>	Nicholas DiCarlo

EDGEMONT UNION FREE SCHOOL DISTRICT

DEPOSIT FORM

DEPOSITORY ACCOUNT #: _____ DATE: _____

ACCOUNT NAME: _____

PERSON COLLECTING FUNDS: _____

PERSON PREPARING DEPOSIT: _____

PURPOSE OF DEPOSIT/INTENDED USE: _____

CHECKS		CASH			
CHECK #	CHECK AMOUNT	DENOMINATION	QUANTITY	VALUE	CASH AMOUNT
		Pennies		\$0.01	
		Nickels		\$0.05	
		Dimes		\$0.10	
		Quarters		\$0.25	
		Half Dollars		\$0.50	
		One Dollar Bills		\$1.00	
		Five Dollar Bills		\$5.00	
		Ten Dollar Bills		\$10.00	
		Twenty Dollar Bills		\$20.00	
		Fifty Dollar Bills		\$50.00	
		One Hundred Dollar Bills		\$100.00	
If more than ten checks are in the deposit, attach a copy of the adding machine tape.					
CHECK TOTAL		CASH TOTAL			
					TOTAL DEPOSIT

SIGNATURE OF DEPOSITOR: _____

DATE: _____

SIGNATURE OF RECEIVER: _____

DATE: _____