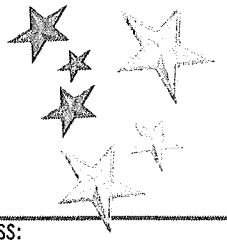
Symmes Elementary PTO

Deposit Record



YOUR NAME:	PHONE OR EMAIL ADDRESS:
COMMITTEE OR PROJECT:	
TOTAL AMOUNT: $	DATE SUBMITTED:
SPECIFIC DESCRIPTION OF SOURCE OF FUNDS:	

PLEASE COMPLETE THE FOLLOWING INFORMATION FOR YOUR DEPOSIT:

CASH	QUANTITY	TOTAL
$100.00		$
$50.00		$
$20.00		$
$10.00		$
$5.00		$
$2.00		$
$1.00		$
	TOTAL CASH	$

COIN	QUANTITY	TOTAL
$1.00		$
$0.50		$
$0.25		$
$0.10		$
$0.05		$
$0.01		$
	TOTAL COIN	$

CHECKS	QUANTITY	TOTAL
		$

FOR TREASURER'S USE ONLY: ACCOUNT # _____ TOTAL DEPOSIT _____ DATE _____