

SEQUOIA UNION HIGH SCHOOL DISTRICT
MENLO-ATHERTON HIGH SCHOOL

DEPOSIT SLIP

DATE: _____
ORG./DEPT.: _____
ACTIVITY: _____

	# OF BILLS	AMOUNT
CHECKS		\$
\$100		\$
\$50		\$
\$20		\$
\$10		\$
\$5		\$
\$2		\$
\$1		\$

	# OF COINS	AMOUNT
\$1		\$
\$0.50		\$
\$0.25		\$
\$0.10		\$
\$0.05		\$
\$0.01		\$

Total	\$
Less Change	\$
Net Total	\$

Note: Fund collection detail is required for deposits. Documentation should indicate the payees' name, how much each person paid, how they paid (check/cash) and what they paid for. For questions regarding appropriate documentation, please contact the Treasurer's Office.

(DEPOSITOR)

(ORGANIZATION ADVISOR)

(RECEIPT NUMBER)

(TREASURER)

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(DEPOSITOR)

(ORGANIZATION ADVISOR)

(RECEIPT NUMBER)

(TREASURER)

If no additional documentation is provided

[illegible]

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[illegible]