

DEPOSIT FORM

Davidsonville Elementary School PTO

Person Making Deposit: _____

Phone: _____ E-mail: _____

Committee: _____

Event: _____

Source of Income	Number	Total For Each
Coins		
\$1's		
\$5's		
\$10's		
\$20's		
\$50's		
\$100's		
Subtotals Cash		

If you are sending a large batch of checks, please include a spreadsheet that states the Name of the check holder, the check number and the amount of the check.

Total Number of Checks and Money Orders: _____

Total Amount of Checks and Money Orders: _____

Total Deposit (Cash, Checks and Money Orders): _____

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Deposited By: _____

Date: _____

Slip #: _____