



ROOSEVELT PTA CHECK/CASH RECEIPT FORM

Complete form and put in Treasurer's box in school office
Keep a copy for your records and put a copy in the President's mail box
**** Contact Treasurer to discuss large deposits****

Committee/Event: _____ Date Submitted: _____

Submitter's Name: _____ Email and/or Phone: _____

CHECKS RECEIVED:

Total Number of Checks: _____

Total Checks: \$ _____

Please note: You must list last name and check amount for each check on back of this page. Attach additional sheets if necessary.

CASH RECEIVED:

Total Currency: \$ _____

Total Coins: \$ _____

Total Cash: \$ _____

TOTAL DEPOSIT AMOUNT \$ _____

Chairperson's signature: _____

Secondary counter's signature: _____

FOR TREASURER USE ONLY

Treasurer's Signature: _____

Date Received: _____ Date Deposited: _____