

Arrowhead Primary School PTA

Cash or Check Deposit

Date:	Total Deposit Amount:
Committee:	Submitted by:

CASH

Dollars	#	Amount
\$1.00		\$ -
\$5.00		-
\$10.00		-
\$20.00		-
\$50.00		-
\$100.00		-
Total Cash		\$ -

Coins	#	Amount
\$0.01		\$ -
\$0.05		-
\$0.10		-
\$0.25		-
\$0.50		-
\$1.00		-
Total Coins		\$ -

CHECKS

	Name on Check	Check #	Check Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Check Subtotal from other pages	-
Total Check Amount	\$ -

Preparer Signature	Date	Treasurer Signature	Date
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Please complete all the information requested above.
Contact treasurer@arrowheadpta.org to coordinate drop off.

	Name on Check	Check #	Check Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
Total Check Amount from page 2			\$ -

	Name on Check	Check #	Check Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
Total Check Amount from page 3			\$ -

