



To: Christine Miller, Assistant Treasurer

From: \_\_\_\_\_

Date: \_\_\_\_\_

Coins \_\_\_\_\_

Currency \_\_\_\_\_

Checks \_\_\_\_\_

TOTAL \_\_\_\_\_

Deposit Breakdown	
Budget Category	Amount
_____	_____
_____	_____
_____	_____

Cash Breakdown:

\$1 x \_\_\_\_\_ \$10 x \_\_\_\_\_

\$5 x \_\_\_\_\_ \$20 x \_\_\_\_\_

**CHECKS (List individually)**

Name	Check #	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
<b>Subtotal of checks</b>		<b>\$ _____</b>

**CHECKS (continued)**

Name	Check #	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
<b>Subtotal of checks</b>		<b>\$ _____</b>

Signature of Person Submitting Deposit: \_\_\_\_\_ Print Name: \_\_\_\_\_

Signature of Person Verifying Deposit: \_\_\_\_\_ Print Name: \_\_\_\_\_