

Collected Funds/Deposit

**St. Anne's Parents' Association
Operating Checking Account**

G/L Acct #: _____

G/L Acct Name: _____

(PA Treasurer Completes)

To Be Completed By Event Treasurer

Collected By: _____ Date: _____

Event/Purpose
Description: _____

- Total Currency Collected: \$ _____

- Total Number of Checks: _____

- Total Dollar Amount of Checks: \$ _____

- Total Dollar Amount of Deposit (Currency + Checks): \$ _____

Please give completed form and funds collected to the Parents' Association Treasurer.
Also, please attach a copy of your payment spreadsheet/list if one has been done, to this form.

To Be Completed By PA Treasurer

Date Deposit Made: _____

Total Dollar Amount of Deposit: \$ _____

PA Treasurer's Signature: _____