

Deposit of Funds Form

Date : _____

PTO Activity/Event: _____



Ferguson Twp Elementary PTO

	AMOUNT
Checks:	
Bills larger than \$20:	
# \$20 Bills ___ x 20 =	
# \$10 Bills ___ x 10 =	
# \$5 Bills ___ x 5 =	
# \$1 Bills ___ x 1 =	
# of Quarters ___ x .25 =	
# of Dimes ___ x .10 =	
# of Nickels ___ x .05 =	
# of Pennies ___ x .01 =	
TOTAL DEPOSIT:	

Submitted By: _____

(Printed Name)

(Signature)

Verified By: _____

(Printed Name)

(Signature)

Treasurer: _____

(Printed Name)

(Signature)

For PTO Use Only:

Date Deposited: _____

Budget Category: _____

Ledger #: _____