

LSHS Band Booster DEPOSIT

Itemized Receipt Form
(To be used when giving funds to Treasurer)

Event _____ Date _____

Chairman _____ Phone No. _____

Person completing form _____ Phone No. _____

(Please make sure that there are always 2 people counting money to protect the reliability of the count)

Total of checks (attach a tape/written account) \$ _____

Bills	#	Amount
\$100		
\$50		
\$20		
\$10		
\$5		
\$2		
\$1		
Total		

Total Bills \$ _____

Coins	#	Amount
Dollar		
50 Cent		
Quarters		
Dimes		
Nickels		
Pennies		
Total		

Total Coins \$ _____

Total Cash \$ _____

Total Deposit \$ _____

Counter's Signature _____

Counter's Signature _____ Date _____

Received by Treasurer _____ Date _____