

**SPRINGMAN/ATTEA PTA
DEPOSIT SLIP**

EVENT NAME: _____

DATE OF EVENT: _____

EVENT CHAIR(S): _____

DEPOSIT INFORMATION

TOTAL # CHECKS: _____

TOTAL \$ AMOUNT IN CHECKS: \$ _____

TOTAL \$ AMOUNT CASH: \$ _____

TOTAL DEPOSIT (CHECKS & CASH): \$ _____

SIGNATURE: _____

ASSISTANT TREASURER SIGNATURE: _____

Please contact Helen Costello to coordinate drop off. Thank you.