

MOHEGAN SCHOOL PTO

Deposit Notice

Your Name: _____ Phone: _____

Date Submitted: _____

Project/Event: _____

Total Deposit Amount: \$

Specific Description of Source: (ex: payments for ice cream)

Complete the following information for your deposit.

Cash	Checks (<i>please stamp all checks</i>)
Total cash: \$ _____	Number of checks: _____
	Total of checks: \$ _____

Amount Verification Signature _____

Amount Verification Signature _____

[deposits in excess of \$500 need 2 people to verify the amount to be deposited]

~ ~ Once this form is complete, email to Dena Renda at drenda@gmail.com and place deposits in safe in main office. Call Dena at 203-560-1942 ~ ~

For Treasurer's Use Only

Transaction ID: _____ Deposit Date: _____ Deposit Slip Rcvd? _____

Deposit Recorded:

PTO Treasurer: _____ Date: _____
