CashBoxRequest

Hillside School PTA

Complete one form per cashbox

YOURNAME:	PHONE () -
PROJECT/CATEGORY	
DATE SUBMITTED	DATE NEEDED
/ /	/ /
TOTALAMOUNTNEEDED	

Change Requested

CASH	QUANTITY	TOTAL
\$10.00		\$
\$5.00		\$
\$1.00		\$
\$0.25		\$
\$0.10		\$
\$0.05		\$
\$0.01		\$
TOTALCASH		

Have an authorized volunteer verify the cash in the box before the event begins. Sign below. At the end of the event, an authorized volunteer should count the remaining cash, record it on a Deposit Notice form, and turn it over to the treasurer to be deposited.

APPROVED BY(PTA OFFICER)	DATE		
		/	/
		,	,
VERIFIED BY EVENTVOLUNTEER	DATE		
		/	/
		/	/

Check#

ForTreasurer's Use Only:Category____

Date

Logged_____