PTA Income Slip

Date: _____

To: Treasurer for [✓ one]: ❑ Council ❑ Primrose ❑ SIS ❑ SMS ❑ SHS ❑ SEPTA

From: _____ Committee: _____

Child's Name/Teacher: _____ Money Counted by: _____

Received by _____ Total Confirmed $_____ Date Deposited _____

Cash.	$
Checks.	$
Other..	$
Total Amount Enclosed. . . .	$

Cash

Currency	Number Each	Total
100s		
50s		
20s		
10s		
5s		
1s		
Coins		
Total		

Checks

(Attach additional pages as necessary)

Name	Check #	Amount

Checks (continued)

Name	Check #	Amount
Total		