Thornebrooke Elementary School PTO

Verification/Receipt Form

Attach Deposit Receipt Here

Date:	
Committee:	
Event:	

Number of:	Coin Type	Total Each Type	Number of:	Bill Type	Total Each Type
	Pennies	$		$1	$
	Nickels	$		$5	$
	Dimes	$		$10	$
	Quarters	$		$20	$
	Other:	$		$50	$
	Rolled Coins	$		$100	$
TOTAL COINS:		$	TOTAL BILLS:		$
				Total Cash:	$

Name on Check	Check Number	Amount	Name on Check	Check Number	Amount
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$

Name on Check	Check Number	Amount	Name on Check	Check Number	Amount
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
		$			$
				Total Checks:	$
				Grand Total	$

Verification -- To Be Completed by PTO Board Members:

Signature of Person Receiving Funds	Signature of Person Receiving Funds

Signature of Treasurer Receiving Funds: