

**EASTVIEW PTA
CASH RECEIPT FORM
2018-2019**

Treasurer Use Only:	
Date	
Amount	
Audit	

Date: _____

Amount: _____

Committee: _____

Member Name: _____

Event/Purpose: _____

Counted By: _____

Counted By: _____

All funds must be counted by two PTA members and signed above,
prior to being submitted to the Treasurer.

Treasurer Counted: _____

Total Coin	
Total Paper	
Total Checks	
Total Receipts	

# Cks Deposited	
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		#	=	Amount
COIN:	Pennies		=	
	Nickels		=	
	Dimes		=	
	Quarters		=	
Total Coins				

PAPER:	Ones		=	
	Fives		=	
	Tens		=	
	Twenties		=	
Total Paper				

CHECKS:		
	# Checks	Total Amount

Please attach a Detail Check Listing with the following information for EACH check:

Last Name, Check Number and Check Amount.

The total of this Detail Check Listing should agree with the amount above.

If you have any questions, please contact the Treasurer, Kim Snavelly, at 419-351-3751.