## Itemized Receipt Form (To be used when giving funds to Treasurer)

Event				Date
Chairman				Phone No.
Person completing form				Phone No
(Please make sure that th	ere are alwa	ys 2 people counting m	oney to protect the re	liability of the count)
Total of checks (attach a tape/written account)				\$
Bills	#	Amount		
\$100				
\$50				
\$20				
\$10				
\$5				
\$2				
\$1				
Total				
		Total Bills	\$	
Coins	#	Amount		
Dollar				
50 Cent				
Quarters				
Dimes				
Nickels				
Pennies				
Total				
Total Coins \$				
			Total Cash	\$
			Total Deposi	t \$
Counter's Signature _				
Counter's Signature				
Received by Treasurer				Date

(When turning in a deposit, please allow time for another count of the total deposit so a receipt can be given to the person turning in the deposit.)