

FHS ATHLETIC BOOSTER CLUB Deposit Form

Event/Team: _____

Date: _____

Contact: _____

Phone: _____

CASH

Type Of Bill	#	Amount
\$100		\$
\$50		\$
\$20		\$
\$10		\$
\$5		\$
\$2		\$
\$1		\$
TOTAL		\$

Type of Coin	#	Amount
Quarter		\$
Dime		\$
Nickel		\$
Penny		\$
TOTAL		\$

Total Cash \$ _____

CHECKS

	Last Name	Check #	Amount
1			\$
2			\$
3			\$
4			\$
5			\$
6			\$
7			\$
8			\$
9			\$
10			\$

	Last Name	Check #	Amount
11			\$
12			\$
13			\$
14			\$
15			\$
16			\$
17			\$
18			\$
19			\$
20			\$

of checks _____

Total Checks \$ _____

TOTAL DEPOSIT \$ _____

Counted by: _____

Received by: _____

Date: _____

For Treasurer's Use Only

Budget Category: _____

Notes: _____

