

**.AMHERST PTA
DEPOSIT FORM**

Committee/ Event _____ Date of Receipt _____

Items/Tickets sold, if applicable _____ Unit Price \$ _____

Please attach any supporting documentation or breakdown of receipts, if available.

Amount of Cash \$ _____

Amount of Checks \$ _____

Total Receipts \$ _____

Counted and Verified By _____

Counted and Verified By _____ (PTA Officer)

Treasurer Use Only: Date of Bank Deposit _____

Budget Line Item _____

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