

**POTOMAC ELEMENTARY SCHOOL
PTA DEPOSIT FORM**

Date: _____

Account/Activity: _____

Purpose: _____

Money received from: _____, (your name)
for the purpose indicated above.

Deposit Amount: _____

DEPOSIT MAKEUP

Checks: \$ _____ **Total # of Checks:** _____
(Please make copies of checks and remove staples.)

Dollars: \$ _____ **\$1** _____ **\$5** _____ **\$10** _____ **\$20** _____

Coins: \$ _____ **Pennies:** _____
Nickels: _____
Dimes: _____
Quarters: _____

Grand Total: \$ _____

(Your signature)

Phone #: _____

E-Mail: _____

Received by: _____

Title: _____

Date: _____

Deposit Date: _____