

# Deposit Verification

Hilliard Heritage Middle School  
5670 Scioto Darby Rd  
Hilliard, Ohio 43026

Your Name \_\_\_\_\_ Phone \_\_\_\_\_

Project \_\_\_\_\_

Date Submitted \_\_\_\_\_

Specific Description of Source (ex: Concession receipts): \_\_\_\_\_

***Complete the following information for your deposit:***

Cash			
	\$50	x	_____ = _____
	\$20	x	_____ = _____
	\$10	x	_____ = _____
	\$ 5	x	_____ = _____
	\$ 1	x	_____ = _____
	\$ .25	x	_____ = _____
	\$ .10	x	_____ = _____
	\$ .05	x	_____ = _____
	\$ .01	x	_____ = _____
	Total Cash		\$ _____

Checks	
Number of checks	_____
<i>*List of Check #s and Amounts should be attached to this form</i>	
Total checks	\$ _____

**Total Deposit** \$ \_\_\_\_\_

Verified by Event Volunteer \_\_\_\_\_ Date \_\_\_\_\_

Accepted by (PTO Treasurer) \_\_\_\_\_ Date \_\_\_\_\_

For Treasurer's Use Only

Transaction ID \_\_\_\_\_ Date \_\_\_\_\_ Logged \_\_\_\_\_