



St. Michael's Parents' Association

### DEPOSIT SHEET

Prepared by: \_\_\_\_\_

Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Committee: \_\_\_\_\_

Categorization of money: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cash: \_\_\_\_\_ (#) x \$1.00 = \_\_\_\_\_

\_\_\_\_\_ (#) x \$5.00 = \_\_\_\_\_

\_\_\_\_\_ (#) x \$10.00 = \_\_\_\_\_

\_\_\_\_\_ (#) x \$20.00 = \_\_\_\_\_

\_\_\_\_\_ (#) x \$50.00 = \_\_\_\_\_

Total = \_\_\_\_\_

Coins: \_\_\_\_\_ (#) x 1¢ = \_\_\_\_\_

\_\_\_\_\_ (#) x 5¢ = \_\_\_\_\_

\_\_\_\_\_ (#) x 10¢ = \_\_\_\_\_

\_\_\_\_\_ (#) x 25¢ = \_\_\_\_\_

\_\_\_\_\_ (#) x \$1.00 = \_\_\_\_\_

Total = \_\_\_\_\_

Checks Total = \_\_\_\_\_ (be sure to fill out back)

Deposit Total = \_\_\_\_\_

Verified by: \_\_\_\_\_ (SMPA Treasurer)

Office Use Only: Verified by: \_\_\_\_\_

Date: \_\_\_\_\_

CR Sheet \_\_\_\_\_

### CHECK REGISTER FOR DEPOSIT

|    | Check # | Person's Name who wrote Check | Amount |
|----|---------|-------------------------------|--------|
| 1  |         |                               |        |
| 2  |         |                               |        |
| 3  |         |                               |        |
| 4  |         |                               |        |
| 5  |         |                               |        |
| 6  |         |                               |        |
| 7  |         |                               |        |
| 8  |         |                               |        |
| 9  |         |                               |        |
| 10 |         |                               |        |
| 11 |         |                               |        |
| 12 |         |                               |        |
| 13 |         |                               |        |
| 14 |         |                               |        |
| 15 |         |                               |        |
| 16 |         |                               |        |
| 17 |         |                               |        |
| 18 |         |                               |        |
| 19 |         |                               |        |
| 20 |         |                               |        |
| 21 |         |                               |        |
| 22 |         |                               |        |
| 23 |         |                               |        |
| 24 |         |                               |        |
| 25 |         |                               |        |
| 26 |         |                               |        |
| 27 |         |                               |        |
| 28 |         |                               |        |
| 29 |         |                               |        |
| 30 |         |                               |        |

Total = \_\_\_\_\_

Office Use Only: Verified by: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 CR Sheet \_\_\_\_\_

### CHECK REGISTER FOR DEPOSIT

|    | Check # | Person's Name who wrote Check | Amount |
|----|---------|-------------------------------|--------|
| 31 |         |                               |        |
| 32 |         |                               |        |
| 33 |         |                               |        |
| 34 |         |                               |        |
| 35 |         |                               |        |
| 36 |         |                               |        |
| 37 |         |                               |        |
| 38 |         |                               |        |
| 39 |         |                               |        |
| 40 |         |                               |        |
| 41 |         |                               |        |
| 42 |         |                               |        |
| 43 |         |                               |        |
| 44 |         |                               |        |
| 45 |         |                               |        |
| 46 |         |                               |        |
| 47 |         |                               |        |
| 48 |         |                               |        |
| 49 |         |                               |        |
| 50 |         |                               |        |
| 51 |         |                               |        |
| 52 |         |                               |        |
| 53 |         |                               |        |
| 54 |         |                               |        |
| 55 |         |                               |        |
| 56 |         |                               |        |
| 57 |         |                               |        |
| 58 |         |                               |        |
| 59 |         |                               |        |
| 60 |         |                               |        |

Total = \_\_\_\_\_

Office Use Only: Verified by: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 CR Sheet \_\_\_\_\_

### CHECK REGISTER FOR DEPOSIT

|    | Check # | Person's Name who wrote Check | Amount |
|----|---------|-------------------------------|--------|
| 61 |         |                               |        |
| 62 |         |                               |        |
| 63 |         |                               |        |
| 64 |         |                               |        |
| 65 |         |                               |        |
| 66 |         |                               |        |
| 67 |         |                               |        |
| 68 |         |                               |        |
| 69 |         |                               |        |
| 70 |         |                               |        |
| 71 |         |                               |        |
| 72 |         |                               |        |
| 73 |         |                               |        |
| 74 |         |                               |        |
| 75 |         |                               |        |
| 76 |         |                               |        |
| 77 |         |                               |        |
| 78 |         |                               |        |
| 79 |         |                               |        |
| 80 |         |                               |        |
| 81 |         |                               |        |
| 82 |         |                               |        |
| 83 |         |                               |        |
| 84 |         |                               |        |
| 85 |         |                               |        |
| 86 |         |                               |        |
| 87 |         |                               |        |
| 88 |         |                               |        |
| 89 |         |                               |        |
| 90 |         |                               |        |

Total = \_\_\_\_\_

Office Use Only: Verified by: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 CR Sheet \_\_\_\_\_