

TREASURY CASH/CHECK DEPOSIT FORM

Date:			
Person Dep	ositing Funds:		
Phone#:			
PTA Comm	ittee/Event:		
Total Amou	ınt:		
□ CAS	· -	s please use a separate sheet)	
Sr. No.	Check # (Applicable only for check deposits.)	Amount	
Notes:	TOTAL		
I acknowledge	that the total deposit amou	ant above is complete and accurate:	submitted funds to Treasurer to deposit
Date Deposited:		Signed by Treasurer:	(signature ount above has been verified)
* For security 1	ourposes, check(s) should n	indicates that am ot be left in the school office.	ount above has been verified)

for the funds to be given to her.

^{*} For security purposes, check(s) should not be left in the school office.

If you have check(s) to deposit, contact the Treasurer, Varsha Manjrekar at ptatreasurer@mlkedison.org and arrange