RMAE PTO

Deposit Notice

Your Name _____ Phone _____

Date Submitted _____

Project _____

Total Amount **$**_____

Specific Description of Source (*ex: payments for pizza*)

_____

Complete the following information for your deposit

Cash	***Checks (use back of form if needed)***
$20 x ____ = _____.____	Name Check #
$10 x ____ = _____.____	
$ 5 x ____ = _____.____	
$ 1 x ____ = _____.____	
.25 x ____ = _____.____	
.10 x ____ = _____.____	
. 05 x ____ = _____.____	
.01 x ____ = _____.____	Number of Checks _____
Total Cash $ _____	***Total Checks $*** _____

Account/ Budget Area _____ Deposit Date _____

Logged in Computer_____