

Waubonsie Valley High School - OPA Cash/Check Deposit Form

Event/Committee: _____ Date Remitted: _____

Person Remitting: _____ Phone #: _____

Additional description (if necessary): _____

Check Total (Attach totaled list)

- Number of Checks _____ \$ _____
- Total Currency Collected (see worksheet below): \$ _____
- Total Coins Collected (see worksheet below): \$ _____

Total Deposit or Remittance Made

\$

Cash Worksheet:

Currency		Coin	
Twenty	_____ x \$20 = \$ _____	Quarters	_____ x \$ 0.25 = \$ _____
Ten	_____ x \$10 = \$ _____	Dimes	_____ x \$ 0.10 = \$ _____
Five	_____ x \$ 5 = \$ _____	Nickels	_____ x \$ 0.05 = \$ _____
One	_____ x \$ 1 = \$ _____	Pennies	_____ x \$ 0.01 = \$ _____
Total Currency	\$ _____	Total Coin	\$ _____

Two confirming signatures: x _____
 (Required for cash deposit)
 x _____

**PLEASE REMIT FUNDS WITHIN 2 BUSINESS DAYS OF COLLECTION TO
 TREASURER Carolyn Schur - cschur@me.com - 630-544-1499**

For Treasurer's Use Only: Deposit Date ____ / ____ / ____
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