

Sowams School PTO Deposit Information Form

Date: _____

Proceeds From: _____

Check(s) collected and tallied by: _____
(name of event or activity generating deposit)

In the Case of Cash Transactions:

Collected and Counted by (please sign): _____

Committee Representative: _____
By way of your Committee Representative signature, you are giving witness that you delivered, to the PTO Treasurer/Executive Board Member, the monies generated by the stated event/activity.

PTO Treasurer/Executive Board Member: _____
By way of your PTO Treasurer/Executive Board Member signature, you are giving witness that you received, from the Committee Representative, the monies generated by the stated event/activity.

Amount of Deposit: \$ _____

Comments: (if necessary) _____

Project Generating Income:

- | | | |
|---|--|--|
| <input type="checkbox"/> Book Fair | <input type="checkbox"/> Green Team | <input type="checkbox"/> Principal's Fund |
| <input type="checkbox"/> Box Tops for Education | <input type="checkbox"/> Grocery Rewards | <input type="checkbox"/> School Photos |
| <input type="checkbox"/> Charity | <input type="checkbox"/> Kids in Motion | <input type="checkbox"/> School Store |
| <input type="checkbox"/> Courtyard and Grounds | <input type="checkbox"/> Membership | <input type="checkbox"/> Third Grade Reception |
| <input type="checkbox"/> Extended Day | <input type="checkbox"/> Octoberfest | <input type="checkbox"/> T-Shirt Fundraiser |
| <input type="checkbox"/> Family Math/Science | <input type="checkbox"/> Outdoor Day | <input type="checkbox"/> Voilin |
| <input type="checkbox"/> First Grade Garden | <input type="checkbox"/> Spring Fling | <input type="checkbox"/> Yearbook |
| | <input type="checkbox"/> Playground | |
| | | <input type="checkbox"/> Other (specify) |

For Office Use Only

Date of Deposit: _____