



Victory Elementary PTO
Cash Box Request

Complete One Form per Cash Box

Your Name: _____ Phone: _____

Committee/Event: _____

Date Submitted: _____

Date Needed: _____

Specific location for this cash box (e.g.: concessions): _____

For each denomination requested, specify both the number of bills/coins and \$ amount:

\$10 x _____ = \$	<p>Note: Following the event, remaining change and money collected should be recorded on a Deposit Notice form. This should be submitted to the Treasurer with the return of the box.</p> <p>At the conclusion of the event, please note the signatures of the two cash box counters below:</p> <hr/> <hr/>
\$5 x _____ = \$	
\$1 x _____ = \$	
\$.25 x _____ = \$	
\$.10 x _____ = \$	
\$.05 x _____ = \$	
\$.01 x _____ = \$	
Total for this Cash Box \$ _____	

Obtain appropriate handwritten signature below prior to submitting to Treasurer:

Approved by _____ Date _____
 (PTO Officer/ Committee Chair other than requestor)

The box must be verified at the time of receipt and signed below:

Verified by Requestor _____ Date _____

For Treasurer's Use Only

Accepted by _____ Date _____
 (PTO Treasurer)

Account: Cash box clearing	Dated: _____	Total Wd Amt: _____	Logged
Note: Ensure that cash box clearing account is zeroed out upon recording associated deposit.			