

RSE PTA ITEMIZED RECEIPT FORM

Budget Category/Event : _____ Date of Event: _____

Event Chair/Coordinator: _____ Date of Submittal: _____

CASH

Bills	Quantity	Dollar Amount
\$1		
\$2		
\$5		
\$10		
\$20		
\$50		
\$100		
Total		

Total CASH in Bills: \$ _____

Coins	Quantity	Dollar Amount
Pennies (\$0.01)		
Nickels (\$0.05)		
Dimes (\$0.10)		
Quarters (\$0.25)		
Fifty Cents (\$0.50)		
Dollars (\$1.00)		
Total		

Total CASH in Coins: \$ _____

CHECKS

CHECKS <small>(Group by Dollar Amount)</small>	Quantity	Dollar Amount
Total		

Total CHECKS: \$ _____

TOTAL FUNDS RECEIVED: \$ _____

Note: At least 2 PTA members must count money and attest to ensure accuracy. Treasurer provides a copy of Itemized Receipt Form to Program or Event Chair/Coordinator and Counters by request.

Funds Verified by Counter #1: _____ Printed Name: _____
signature

Funds Verified by Counter #2: _____ Printed Name: _____
signature

Treasurer's Signature: _____ Date Counted: _____