

# ACHS PTSA



4660 Mission Oaks Blvd, Camarillo, CA 93012

## CASH VERIFICATION FORM

Date: \_\_\_\_\_ Person Submitting Form: \_\_\_\_\_

Credit Committee/Event	Amount	Credit Committee/Event	Amount

**Coins:**

\_\_\_\_\_ x .01= \_\_\_\_\_  
 \_\_\_\_\_ x .05= \_\_\_\_\_  
 \_\_\_\_\_ x .10= \_\_\_\_\_  
 \_\_\_\_\_ x .25= \_\_\_\_\_  
 \_\_\_\_\_ x .50= \_\_\_\_\_  
 \_\_\_\_\_ x 1.00= \_\_\_\_\_

**Coin Total:** \$ \_\_\_\_\_

**Currency:**

\_\_\_\_\_ x \$1= \_\_\_\_\_  
 \_\_\_\_\_ x \$5= \_\_\_\_\_  
 \_\_\_\_\_ x \$10= \_\_\_\_\_  
 \_\_\_\_\_ x \$20= \_\_\_\_\_  
 \_\_\_\_\_ x \$50= \_\_\_\_\_  
 \_\_\_\_\_ x \$100= \_\_\_\_\_

**Currency Total:** \$ \_\_\_\_\_

**① TOTAL CASH \$** \_\_\_\_\_

Checks (attach adding machine tape of itemized checks):

Last Name on Check	Student Last Name (if Different)	Teacher Name	Check #	Amount

*(List additional checks on back)*

**② TOTAL CHECKS \$** \_\_\_\_\_

**③ TOTAL DEPOSIT (Cash + Checks): \$** \_\_\_\_\_

Counter's  
Signature: \_\_\_\_\_

Verifier's  
Signature: \_\_\_\_\_

*For Financial Secretary's or Treasurer's Use:*

Amount Received: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_  Financial Secretary     Treasurer

➔ *Make at least 4 copies of this form and submit with your money. Use the information at the very top of this form to route each copy to the appropriate person after processing.*

