CASH BOX REQUEST

Memorial Middle School PTO

Please submit request with at least seven business days advance notice. Submit at PTO meeting just prior to event, if possible.											
D	ate Submi	itted/_				Date Needed/					
Y	our Name				Phone ()						
Pı	Project / Event/Account Total Amount Needed: \$										
To											
Change Requested:					Change Returned:						
	Cash	Quantity Requested	Subtotal Requested	Received (initials)	С	ash	Quantity Returned	Subto Return		Verified (initials)	
	\$20.00		\$		\$2	0.00		\$			
	\$10.00		\$		\$1	0.00		\$			
	\$5.00		\$		\$	5.00		\$			
	\$1.00		\$		\$	1.00		\$			
	\$0.25		\$		\$(0.25		\$			
	\$0.10		\$		\$(0.10		\$			
	\$0.05		\$		\$(0.05		\$			
	\$0.01		\$		\$(0.01		\$			
	Total Cash: \$				Tot	Total Cash: \$					
Verify the cash in the cash box before the event begins and initial the "received" column under Chang Requested. At the end of the event, return the same amount of cash (denominations may differ) with thi form, initialing the "verified" column under Change Returned. Count all remaining cash from the event an submit on a Deposit form. Return all cash to Treasurer or President within 3 business days of event.											
Αı	Amount verified when received:										
PTO Officer								9	/	1	
Volunteer							Date	_ Date/		/	
Ar	nount ver	ified when ret	turned:								
PTO Officer								Date/		1	
Volunteer (2 volunteer signatures required if PTO officer not pro							Date		_/	/	
For Treasurer's Use Only											
De	livered Date)	Deposit	t within three bus	iness day	ys of rec	eipt of returned	t change.			
Date Returned/ Attach bank deposit receipt to this form.											