



Sunrise Elementary PTA Deposit of Credit Card Funds

Your Name: _____ Date: _____
Your Phone Number: _____
Committee to be credited: _____

Qty of Transactions: _____

Total Amount of Transactions: _____

Did you run a detail report?

Did you run a settlement report?

Attach both reports with the individual merchant copies to this form.

TOTAL DEPOSIT: _____

***Please make a copy of this form for your records before submitting.**

Transactions must be confirmed by 2 PTA members and both must sign below before giving it to the Treasurer. By signing below, I verify that I counted this money and, to the best of my knowledge, the amount is

Signature #1: _____

Signature #2: _____

Treasurer's Use Only

Amount of Deposit Received: _____

Date: _____

Month Recorded: _____

Treasurer's Initials: _____

Comments: _____