

Check # _____
(Treasurer's Use Only)

ROSA PTA Check Request

Payable To: _____

Amount: _____ dollars

\$ _____ (Attach original receipts for this amount) Event _____

Purpose: _____

Requested by: _____ Date: _____
(Print name & sign)

Treasurer Signature: _____ Date: _____

President Signature: _____ Date: _____

- Please attach an addressed envelope for the check to be sent to the Payee, or include a telephone number where you can be reached when your check is ready to be picked up.

ROSA PTA Deposit Request

Event: _____ Date: _____

Counted by (print name & sign):

1. _____

2. _____

Denomination	/	\$ Amount	Denomination	/	\$ Amount
# of Checks:	/		\$1 (coin):	/	
\$100:	/		Half Dollar:	/	
\$50:	/		Quarters:	/	
\$20:	/		Dimes:	/	
\$10:	/		Nickels:	/	
\$5:	/		Pennies:	/	
\$1 (paper):	/		Other:	/	
Total amount of bills:			Total amount of coins:		

Total Deposit Amount: \$ _____