

BRS PTA CASH RECEIPT VOUCHER

FUNDRAISER/ACTIVITY: _____

DATE: _____

PERSONS COUNTING MONEY: _____

(at least TWO PEOPLE are required to count money)

This form is for verification purposes only. Please complete the following information, using **TOTAL AMOUNTS IN ALL AREAS**.

_____ x \$100.00 = \$ _____

_____ x \$50.00 = \$ _____

_____ x \$20.00 = \$ _____

_____ x \$10.00 = \$ _____

_____ x \$5.00 = \$ _____

_____ x \$2.00 = \$ _____

_____ x \$1.00 = \$ _____

Total All Coins* = \$ _____

Total All Checks (# of checks _____) = \$ _____

TOTAL \$ _____ **

Treasurer's Verification _____ **

Treasurer's Signature _____

Date Verified: _____ Date Deposited: _____

Notes/Remarks _____

** SHORT/BALANCED/OVER (circle one)

Amount (if short/over): \$ _____

TOTAL ALL COINS

_____ Dollars x 1.00 = \$ _____

_____ Halves x 0.50 = \$ _____

_____ Quarters x 0.25 = \$ _____

_____ Dimes x 0.10 = \$ _____

_____ Nickels x 0.05 = \$ _____

_____ Pennies x 0.01 = \$ _____