Se DATE: EVENT/PROGRAM: RECEIVED FROM:	eventh Avenue Elementary School SASPTO Deposit Form (Any monies handed in to Treasurer from Chairperson) (Chairperson's name)
TOTAL AMOUNT OF DEPOSIT:	
Currency:	
Coins:	
Checks:	(Please attach "Check Deposit Register or equivalent")

**BRIEF DESCRIPTION:** 

Start Up/Seed Money included in deposit amount: \_\_\_\_\_

(Signature of person turning money in)

(Treasurer's Signature)

For Treasurer's Use Only
Date Deposited \_\_\_\_\_ Amount \_\_\_\_\_ Budget Category \_\_\_\_\_