



Selwyn Elementary School

Cash Deposit (YELLOW FORM)

Date: _____

Starting Cash:
(for making change) \$ _____

Committee: _____

Provided By: _____

Verified By: _____

Counted By:
(Initials)

Verified By:
(Initials)

Checks: # _____	\$ _____	_____	_____
Bills: \$50	\$ _____	_____	_____
\$20	\$ _____	_____	_____
\$10	\$ _____	_____	_____
\$5	\$ _____	_____	_____
\$1	\$ _____	_____	_____
Coins: \$1	\$ _____	_____	_____
<i>(Must be rolled)</i> \$0.25	\$ _____	_____	_____
\$0.10	\$ _____	_____	_____
\$0.05	\$ _____	_____	_____
\$0.01	\$ _____	_____	_____
Total Cash at End:	\$ _____	_____	_____
Less Starting Cash:	<i>(return in cash to person who provided)</i> \$ _____	_____	_____
TOTAL AMOUNT:	\$ _____	_____	_____

(Print Name) **Counted By:** _____

(Print Name) **Verified By:** _____