

**GAYHEAD ELEMENTARY SCHOOL PTA  
RECEIPTS VOUCHER**

Committee: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date: \_\_\_\_\_

\* If depositing more than 17 checks, attach a sheet with **ALL** check numbers and check amount. Complete the Receipts Voucher with the total numbers of checks and \$ amount to be deposited and write "See Attached" across the check area below. **Cash, coins & checks can be deposited together.** \*

BILLS		COINS		CHECKS*		
				Check #	Dollar	Cents
Ones	Pennies			1.		
				2.		
				3.		
Fives	Nickels			4.		
				5.		
				6.		
Tens	Dimes			7.		
				8.		
				9.		
Twenties	Quarters			10.		
				11.		
				12.		
Fifties	Dollar			13.		
				14.		
				15.		
Hundreds				16.		
				17.		
Total: \$	Total: \$			Total:	\$	

**GRAND TOTAL \$** \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

\*\*\*\*\*

Received By : \_\_\_\_\_ Date: \_\_\_\_\_

Print Name (if **not** PTA Treasurer): \_\_\_\_\_

Notes: