

Thomas R. Grover Middle School PTSA

Fund Submission Form

Date Submitted: _____ Date of Event: _____ Committee: _____

Name of Event/Sale: _____

Submitted by: (Two persons must count the money)

1. Name: _____ Phone #: _____

Signature: _____ Email: _____

2. Name: _____ Phone #: _____

Signature: _____ Email: _____

Amount Submitted:

Cash: \$ _____

Checks: \$ _____ # of checks: _____

Total: \$

Submit funds with back-up documentation & calculator tape within one business day after event.

Please call or email the treasurer to submit funds:

Angela Young, Treasurer

Phone: 609-462-1749

Email: amayoung94@gmail.com

NOTE: This cash advance amount must be submitted separately from the check/cash received at the event. Please keep a copy for your records.

*****For Treasurer Only*****

Funds Received By: _____ Date: _____

Recipient's Signature: _____

Date Deposited: _____ Amount Deposited: _____

Coins: \$.025	x	\$0.10	x	\$.05	x	\$.01	x
Bills: \$20	x	\$10	x	\$5	x	\$1	x
Checks							