

# West Friendship Elementary School PTA Receipt Form

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

Account: \_\_\_\_\_

Purpose: \_\_\_\_\_

Money received from \_\_\_\_\_, for the purpose indicated above.  
(print your name)

TOTAL:

Checks:      Number of checks: \_\_\_\_\_      \$ \_\_\_\_\_ (check total)

Cash:

Dollars	# of \$1s	_____	\$	_____	
	# of \$5s	_____	\$	_____	
	# of \$10s	_____	\$	_____	
	# of \$20s	_____	\$	_____	
	# of \$50s	_____	\$	_____	
	# of \$100s	_____	\$	_____	\$ _____ (bill total)

Coins	# of pennies	_____	\$	_____	
	# of nickels	_____	\$	_____	
	# of dimes	_____	\$	_____	
	# of quarters	_____	\$	_____	
	other	_____	\$	_____	\$ _____ (coin total)

**GRAND TOTAL:**      \$ \_\_\_\_\_

\_\_\_\_\_  
Your Signature

Received by: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

Deposited:

Date: \_\_\_\_\_ Account: \_\_\_\_\_