

CARBONDALE AREA SCHOOL DISTRICT STUDENT ACTIVITY DEPOSIT SLIP

Carbondale Area Jr.-Sr. High School
Carbondale Area Elementary School

****DEPOSIT NUMBER:** _____
*(**to be filled in by treasurer**)*

DATE ____/____/____

CLUB/CLASS _____ NUMBER _____

ADVISOR _____

REASON (please give a brief description of exactly what/where this deposit is from.)

CURRENCY:

\$100's	\$	_____	
\$50's	\$	_____	
\$20's	\$	_____	
\$10's	\$	_____	
\$5's	\$	_____	
\$2's	\$	_____	
\$1's	\$	_____	
<u>TOTAL:</u>	\$	_____	\$ _____

COIN:

HALF DOLLARS	\$	_____	
QUARTERS	\$	_____	
DIMES	\$	_____	
NICKELS	\$	_____	
PENNIES	\$	_____	
<u>TOTAL:</u>	\$	_____	\$ _____

CHECKS:

<u>TOTAL:</u>	\$	_____	\$ _____
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CHECK COUNT
(Please record how many checks are included with this deposit.)

GRAND TOTAL: \$ _____