



# SLHS ANGP DEPOSIT SLIP

Please contact the Treasurer with any questions: [ANGPTreasurer@southlakesPTSA.org](mailto:ANGPTreasurer@southlakesPTSA.org)

Deposit From: \_\_\_\_\_

Activity Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Please enter the amount for each Income Category:

<u>Category</u>	<u>Amount</u>	<u>Category</u>	<u>Amount</u>
<u>Donations:</u>		<u>Registrations:</u>	
Corporate	<input type="text"/>	Registration	<input type="text"/>
Parent	<input type="text"/>	Lawn Sign	<input type="text"/>
Other	<input type="text"/>	Raffle	<input type="text"/>
<u>Plant Sale:</u>		<u>Other</u>	
Poinsettias	<input type="text"/>	_____	<input type="text"/>
		Cash:	<input type="text"/>
		Checks:	<input type="text"/>
		Total:	<input type="text"/>

For Treasurer's Use Only:	
Date of Receipt: _____	Date of Deposit: _____