

Coginchaug Regional High School Parents of Performers
DEPOSIT FORM

Received From: _____

Date: _____

Reason for Submission + Details

(general fund/pass-through/student account... fundraiser/bake-sale/donation/other)

Coins: \$ _____

Bills: \$ _____

Checks: \$ _____

TOTAL DEPOSIT: _____

| Check # | From | Amount |
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| | In lieu of list, attach list of individual check amounts with total noted | |
| | | Total \$ |