



SLHS ANGP DEPOSIT SLIP

Please contact the treasurer Jody Wolfe with any questions: ANGPTreasurer@SouthLakesPTSA.org

SLHS ANGP Chair Signature:

ACTIVITY DESCRIPTION

Date:

Coins

Bills

Checks

TOTAL

Please select the correct fundraising category:

Donations		Concession Purchases	
<i>Corporate</i>	<input type="checkbox"/>	<i>Relay for Life</i>	<input type="checkbox"/>
<i>Parent</i>	<input type="checkbox"/>	<i>Other</i>	<input type="checkbox"/>
<i>Other</i>	<input type="checkbox"/>		
Groceries/Escrips		Dining	
<i>Giant</i>	<input type="checkbox"/>	<i>Outback</i>	<input type="checkbox"/>
<i>Harris Teeter</i>	<input type="checkbox"/>	<i>Papa Johns</i>	<input type="checkbox"/>
<i>Safeway</i>	<input type="checkbox"/>	<i>Chic Fil A</i>	<input type="checkbox"/>
<i>Other</i>	<input type="checkbox"/>	<i>Other</i> _____	<input type="checkbox"/>
Plant Sale Expenses		Ticket Sales	<input type="checkbox"/>
<i>Poinsettia Expense</i>	<input type="checkbox"/>	Other _____	<input type="checkbox"/>
<i>Merrifield Gift Card Exp</i>	<input type="checkbox"/>		
<i>Spring Plant Sale Exp</i>	<input type="checkbox"/>		

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