WEXFORD-MISSAUKEE INTERMEDIATE SCHOOL DISTRICT

DETAIL CASH DEPOSIT FORM

DATE: _____

Program: REMC_____ VE _____ SPED _____ GE _____ OTHER _____

CURRENCY		***COINS***	
100	_____	1.00	_____
50	_____	.50	_____
20	_____	.25	_____
10	_____	.10	_____
5	_____	.05	_____
1	_____	.01	_____
(1) TOTAL	_____	(2) TOTAL	_____

CHECKS

CHECK #	CHECK NAME	$ AMOUNT	CHECK #	CHECK NAME	$ AMOUNT

(3) TOTAL _____

	AMOUNT		AMOUNT
(1) Total Currency	_____	Non-Taxable Sales	_____
(2) Total Coin	_____	Taxable Sales	_____
(3) Total Checks	_____	Sales Tax	_____
Total Deposit	_____	**Sub Total**	_____
		Miscellaneous	_____
		Total Deposit	_____

Student Signature _____ Date _____

Staff Signature _____ Date _____

Depositor Signature _____ Deposit Date _____

Corrections made? Yes_____No_____ Explanation: _____

cashdep.frm

8/25/99