BBH PSO Cash & Check Collection Form
2021-2022

PSO Unit: _____ Date:_____

Committee Name:_____ **Total Amount: $_____****
Event or Description of Source:_____
Chairperson: _____ Phone #: _____

Cash Received via Event or Source:

	#		AMOUNT
$100 x	_____	=	$_____
$50 x	_____	=	$_____
$20 x	_____	=	$_____
$10 x	_____	=	$_____
$ 5 x	_____	=	$_____
$ 2 x	_____	=	$_____
$ 1 x	_____	=	$_____
Coins	_____	=	$_____

TOTAL CASH** **$_____ A**

Checks Received via Event or Source:
Total Number of Checks*: _____

CHECK # & LAST NAME*	AMOUNT
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(*Use and print spreadsheet if more than 5 checks)

TOTAL CHECKS **$_____ B**

Grand Total Submitted with Form: **$_____(A+B)**

****Includes Cash Received per Cash Box Request: $_____**

Amounts MUST be verified by 2 PSO MEMBERS - other than spouse or relative:
_____(signature)
_____(signature)

Treasurer's Use:
Received By: _____
Date Received: _____
Date Deposited _____

- Itemize all income on this form. Include cash you may have requested on a previous Cash Box Request.
- All cash & checks collected must be turned in **immediately**, along with this completed form, to your PSO Unit treasurer or locked in school officec.
- Cash receipts collected **can not** be used to pay for other expenses. Complete Check Request for reimbursement of expenses.
- 2 PSO members MUST count & verify cash &/or checks.