**Franklin Regional Intermediate PTO REQUEST FORM**

**$$ CASH BOX REQUEST FORM $$**

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

Purpose: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Denominations** | **QTY** **Box 1** | **QTY** **Box 2** | **QTY** **Box 3** | **QTY** **Box 4** | **TOTAL $$** |
| $20.00 |  |  |  |  |  |
| $10.00 |  |  |  |  |  |
| $5.00 |  |  |  |  |  |
| $1.00 |  |  |  |  |  |
| $0.25 |  |  |  |  |  |
| $0.10 |  |  |  |  |  |
| $0.05 |  |  |  |  |  |
| $0.01 |  |  |  |  |  |

**Total Cash**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Person/Committee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* **For Treasurer**:

Date request Rec’d: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date withdrawal from Bank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Total Cash Delivered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Committee Receipt**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Total Cash Returned: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Treasurer**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Deposit to Bank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Deposited: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return original Cash Box Request to Treasurer one week in advance of the date required so that we can meet your requirements!**