

# Cash Box Request

## Fullerton Magnet Center PTA

### Instructions:

1. Complete this form at least 1 week prior to your event.
2. Specify amounts and denominations as shown.
3. Specify date and time cash box is needed.
4. Treasurer will contact individual to arrange pick up of cash boxes.

### Cash Detail:

#### Paper Currency

- ▶ \$20 Bills x \_\_\_\_\_ = \$ \_\_\_\_\_
- ▶ \$10 Bills x \_\_\_\_\_ = \$ \_\_\_\_\_
- ▶ \$ 5 Bills x \_\_\_\_\_ = \$ \_\_\_\_\_
- ▶ \$ 1 Bills x \_\_\_\_\_ = \$ \_\_\_\_\_

Sub Total \$ \_\_\_\_\_

#### Coin Currency (order by the roll)

- ▶ Quarters = \$10 x \_\_\_\_\_ = \$ \_\_\_\_\_
- ▶ Dimes = \$5 x \_\_\_\_\_ = \$ \_\_\_\_\_
- ▶ Nickles = \$2 x \_\_\_\_\_ = \$ \_\_\_\_\_
- ▶ Pennies = \$1 x \_\_\_\_\_ = \$ \_\_\_\_\_

Sub Total \$ \_\_\_\_\_

**Total \$ \_\_\_\_\_**

### Cash Boxes:

\_\_\_\_\_ Number of Boxes Requested

Date, Time & Location Needed: \_\_\_\_\_

Submitted By: \_\_\_\_\_ Date: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Committee Name: \_\_\_\_\_ Event: \_\_\_\_\_

Treasurer use only:

Check # \_\_\_\_\_ Date: \_\_\_\_\_ Expense Category: \_\_\_\_\_ Amount: \_\_\_\_\_