



# MS 839

A NYC Outward Bound School

## MS839 PTA DEPOSIT FORM

DATE: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

CONTACT INFORMATION: Phone: \_\_\_\_\_

Email: \_\_\_\_\_

PROJECT CATEGORY: \_\_\_\_\_

TOTAL AMOUNT: \_\_\_\_\_

SPECIFIC SOURCE DESCRIPTION (Pizza Payments, etc): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

CASH	QUANTITY	TOTAL (US\$)
\$20.00		
\$10.00		
\$5.00		
\$1.00		
\$0.25		
\$0.10		
\$0.05		
\$0.01		
TOTAL CASH: \$		

CHECK NUMBER	CHECK AMOUNT
TOTAL CHECK: \$	

### APPROVAL

PTA President Signature: \_\_\_\_\_

PTA Treasurer Signature: \_\_\_\_\_

Please submit this form with your vendor quote to the PTA Treasurer  
(pta.treasurer@ms839.org) or place in the PTA drop box located in the main office.

Thank you!

Category: \_\_\_\_\_

Check Date: \_\_\_\_\_

Check #: \_\_\_\_\_