

# Rachel Carson Elementary PTSA

## FUNDS DEPOSIT FORM

Please complete all portions and attach photo copies of checks being submitted  
 Submit completed form to [treasurer@carsonptsa.org](mailto:treasurer@carsonptsa.org)  
 Contact [treasurer@carsonptsa.org](mailto:treasurer@carsonptsa.org) with any questions

**Date:** \_\_\_\_\_

**Name of person submitting funds:** \_\_\_\_\_

**Email and/or phone:** \_\_\_\_\_

**Committee/Purpose of funds:** \_\_\_\_\_

**PTSA budget line description (if known):** \_\_\_\_\_

**Signature of person submitting form:** \_\_\_\_\_

**Signature of chairperson (if different from above):** \_\_\_\_\_

	Last Name	Check #	Comment	Amount
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