

GLADIATORS

Deposit Form (Part 1 of 2 Forms) Club: _____

This form MUST accompany all money given to the Treasurer

Name: _____ Phone #: _____ Date: _____

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 Cash: (to be verified by one other person, verifiers please sign below)

Coin	Currency		
Qtrs. _____	\$1's _____	\$ _____	Number of _____
Dimes _____	\$5's _____	\$ _____	Checks _____
Nickels _____	\$10's _____	\$ _____	
Pennies _____	\$20's _____	\$ _____	Amount of _____
Other _____	Other _____	\$ _____	Checks (See _____
Total Coin _____	Total Currency _____	\$ _____	(Part2 of Form)
	Total Coin _____	\$ _____	
	Total Cash _____	\$ _____	Total Checks & cash _____

Budget Income Category	Purpose	Amount
Banquet Deposits		
Capital Improvement		
Concession Sales		
Donations		
Entry Fees		
Equipment		
Fundraising		
Membership Fees		
Players Fees		
Program Advertising		
Signage / Sponsorship		
Spiritwear Sales		
Summer Camp Fees		
Tournament Income		
Travel Deposits		
Uniform Deposits		
Bank/Credit Card Fees		
Other		

Total _____

Submitter Signature _____

Signature of Verifier: _____

**For questions contact: Kim Margarite – 678-923-2374 – kmargari@bellsouth.net
 Kimberly Russo-Alesi 678-612-1939 – jchsgaatreasurer@gmail.com**

PLEASE USE DEPOSIT STAMP ON ALL CHECKS
 Stamp located in the GAA Treasurer's Box

GLADIATORS

CHECK REMITTANCE FORM (Part 2 of 2 Forms)

MAKE SURE THAT YOU ALSO FILL OUT THE DEPOSIT FORM

Prepared by: _____ Phone #: _____

Date Prepared: _____

Check #	Last Name, First Name	Amount
5*		
10*		
15*		
20*		
25*		
30*		
	Total # of Checks this page	Check Total