

RULE INDEPENDENT SCHOOL DISTRICT

DEPOSIT VERIFICATION FORM

DATE: _____ TOTAL AMOUNT OF DEPOSIT: \$ _____

Sponsor responsible for counting and verification: _____

School employee concurring with count and verification: _____

Source of money: _____

Checks _____

Currency _____

Coin _____

TOTAL \$ _____ (This should equal the "Total amount of
Deposit" as shown at top of this page)

COMMENTS:

Please make one copy of this report for yourself and then turn this in with your deposit to the superintendent. Thank you.

Sponsor

Superintendent