# FUMC LARGE DEPOSIT SLIP

Today's Date: _____     Date of Event: _____

Name of Event_____

Source of Income (ticket sales, coffee sales, VBS deposits, etc.,):

_____

Account Name/Number (if known): _____

Additional Notes (optional): _____

| CHECKS | | |
|---|---|---|
| Check # | Check Amt | Name |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Subtotal: | | |
| Sub total from back: | | |
| Total Checks: | | |

Additional checks can be entered on the back of this form.

*When you have completed this form, please place the form, cash and checks into an envelope (found beside the safe) and drop the deposit in the slot in the safe.*

*Thank you.*

| CASH | | |
|---|---|---|
| $1 X ___ = | | Names not required |
| $5 X ___ = | | |
| $10 X ___ = | | |
| $20 X ___ = | | |
| $50 X ___ = | | |
| $100 X ___ = | | |
| Total Cash: | | |

Total Deposit (checks and cash): _____

Counters, please print and sign your names: (2 counters required)

1. _____

2. _____

## Additional Checks

| Check # | Check Amt | Name |
|---------|-----------|------|
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**Subtotal (enter on front):**

**Please enter additional notes/explanations here:**