

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	\$	Number of
Qtrs. _____	\$1's _____	_____	_____
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
Awards/Banquets		
Coaches Income		
Concession		
Entry Fees		
Equipment		
Facilities		
Fundraising		
Membership		
Officials		
Spiritwear		
Summer Camp		
Supplies		
Tournaments		
Travel		
Uniforms		
Insurance		
Legal		
Sponsorship/signage		
Accounting		
Website		
Bank/Credit Card Fees		
Other		

Total _____

Submitter Signature _____ Signature of Verifier: _____

For questions contact: Carol Brasher 404/625-2597 c.brasher@comcast.net
 Kim Robertson 678/294-9834 markkimr@gmail.com

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



CHECK REMITTANCE FORM (Part 2 of 2 Forms)
MAKE SURE THAT YOU ALSO FILL OUT THE DEPOSIT FORM

Prepared by: _____

Phone #: _____

Budget Category: _____

Date Prepared: _____

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