

HILLSIDE AVENUE SCHOOL



everychild.one voice.®

125 Hillside Avenue
Cranford, New Jersey 07016
(908) 709-6229

Income Receipt and Deposit Voucher

Date Received _____

Amount Received _____

Submitted by: _____ Phone # _____

PTA Committee/Event: _____

Cash \$ _____

Checks \$ _____

Total Deposit \$ _____

Counted By: (Please sign)

Submitter: _____

Other: _____

Attach Deposit Slip

For PTA/Treasurer/Co-Treasurer Use Only:	
Treasurer/Signature	_____
Co-Treasurer/Signature (only one signature needed)	_____
Deposit Date:	_____