

HASA DEPOSIT FORM

of Checks Depositing _____

Total Value of Checks _____

Total amount of Cash Depositing _____

TOTAL DEPOSIT \$ _____

Date Submitted: _____

Date of Event: _____

Type of Event: Enrichment Hospitality Athletic Other

DETAIL: _____

Approval Signoff from HASA member: _____

To be filled out by Treasurer:

Date deposit made: _____

Comments: _____