Nimble Fingers Quilters, Inc.
Deposit summary

NOTE: Do not mail cash!

Received from (name)	Check no.	AMOUNT of Check	AMOUNT of Cash	Purpose (e.g., workshop title/instructor)
		$	$	
Subtotal		$	$	

Total of this deposit $ _____

Notes:

_____

_____

Collected by:

Signature _____ Date_____

Print name _____ Phone_____

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Accounting

GL account_____

Deposit date_____ (Attach deposit receipt from bank) Total _____