

Heat United Soccer Club Deposit Notice

Your Name (HUSC Contact) _____ Phone _____

Date Submitted _____ Amount \$ _____

Name and Date of Event: _____

Specific Description of Source (*ex: payments for raffle tickets*):

Is this Team or Club income? TEAM _____ CLUB _____

Team(s) to be credited: _____

If multiple teams are involved, please note amount to be credited to each team.

Complete the following information for your deposit (all funds should be attached in a sealed envelope).

ALL CHECKS NEED TO BE MADE OUT TO HTSA.

<i>Cash</i>	<i>Checks</i>
\$20 x _____ = _____	Number of Checks _____ Total Checks \$ _____
\$10 x _____ = _____	
\$ 5 x _____ = _____	
\$ 1 x _____ = _____	
.25 x _____ = _____	
.10 x _____ = _____	
.05 x _____ = _____	
.01 x _____ = _____	
Total Cash \$ _____	

HUSC Contact signature: _____ Date _____

Approved by: _____ Date _____

Committee Chair, Head Coach or other HUSC Officer

For Treasurer's Use Only

Account credited _____ Deposit Date _____ Logged _____