

## Archway Academy North Phoenix - PSO DEPOSIT

PSO Committee: \_\_\_\_\_

PSO Member Name: \_\_\_\_\_

Your deposit should include this form and the actual cash/checks

Date	Committee	Dollar amount of checks	Dollar amount of cash	Total Deposit

Drop off with Anita at front office in envelope marked "PSO  
Deposit"

Date \_\_\_\_\_ Treasurer approval \_\_\_\_\_