

**HILLCREST PTA  
EXPENSE VOUCHER**  
Receipts and Invoices must be attached

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Committee: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Description: \_\_\_\_\_  
\_\_\_\_\_

Make check payable to: \_\_\_\_\_ Total: \$ \_\_\_\_\_

Address (if different than home): \_\_\_\_\_  
\_\_\_\_\_

*Treasurer's use only*

*Check #                  Date*  
\_\_\_\_\_

**HILLCREST PTA  
DEPOSIT VOUCHER**  
Cash Deposits Must be Signed by Two Individuals

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Committee: \_\_\_\_\_ Total Deposit: \$ \_\_\_\_\_

Description: \_\_\_\_\_

Coin: \_\_\_\_\_

Bills: \_\_\_\_\_

Checks: \_\_\_\_\_

**Total: \$** \_\_\_\_\_

**Deposit Verified By:**

Signature 1: \_\_\_\_\_

Signature 2: \_\_\_\_\_