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P.O. Box 700, Whitehouse Station, New Jersey 08889

Deposit Long Form

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Note: This Deposit	Long Form must accompany a signed Dep	osit Log.	
Event/Program:			
	(Name of Event, Program, Activity)	(Date)	
Prepared by:			
	(Name)	(Date)	
Received by:			
reconved by.	(Name)	(Date)	
Checks (list in ard	oups according to amounts):		
<u>onoono (not m gre</u>	supe according to amounto,.		
Total # of checks: _			
Amount	= \$		
	x = \$		
	x = \$		
	x = \$		
	x = \$		
	Total checks: = \$		
O			
Currency:			
	_ x = \$		
	x = \$		
	x = \$		
	× = \$		
	Total currency: = \$		
Coins (must be ro	olled):		
	= \$		
	x = \$		
	x = \$		
	_ x = \$		
	Total coins: = \$		

Grand Total: \$ _____

Rev.3/2024