# St. Raphael Home and School Association

Deposit Information – Page ___ of ____

Date_____

**Name of Club/Committee/Fundraiser _____**

**Your Name**_____

**E-mail address**_____

**Total Cash $**_____

**Total Checks $**_____

**Total Deposit $**_____

| **Family Name** | **Amount of Check/Cash** | **Check Number** |
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## Please return this form along with your deposit to:

**Shauna Shepherd– St. Raphael Home & School A/P Treasurer**

542 Kimerly Court, Bay Village, OH 44140 (440) 835-5769 (440)570-3834

shaunaleah@yahoo.com

*It is advised that you retain a copy of this form for your records.*

**For office use only**

$1_____ $5_____ $10_____ $20_____

pennies_____ dimes_____ nickels_____ quarters_____