



CASH BOX REQUEST (2021-2023)

Please make your request for a cash box **at least one week prior** to the event. Place the completed form in the "Cash Box Requests - Filled out" folder within the "Completed Forms" hanging folder in the HSA file cabinet, and email or call me to let me know that the request is in there. I will contact you to make delivery arrangements. **Upon receipt of the cash box, verify the amount of cash and confirm it with your signature at the bottom of the form.**

Thank you,

Colleen Rodriguez
Treasurer, Simmons HSA
267-231-4278 (cell)
colleenrodriguez1@verizon.net

For HSA Purposes Only

Date Received: _____

Date Paid: _____

Check #: _____

EVENT: _____

DATE OF EVENT: _____

COMMITTEE: _____

REQUESTER'S NAME: _____

REQUESTER'S EMAIL/PHONE #: _____

AMOUNT NEEDED: _____

CURRENCY	TOTAL
_____ X \$10.00	\$
_____ X \$5.00	\$
_____ X \$1.00	\$
_____ rolls of quarters (1 roll = \$10.00)	\$
_____ rolls of dimes (1 roll = \$5.00)	\$
_____ rolls of nickels (1 roll = \$2.00)	\$
_____ rolls of pennies (1 roll = \$0.50)	\$
TOTAL	\$

COMMITTEE CHAIRPERSON APPROVAL _____

RECEIVED BY _____ DATE _____