



# Deposit Summary

Area \_\_\_\_\_ Local \_\_\_\_\_

Deposit Date \_\_\_\_\_ Deposit Amount \_\_\_\_\_

*Please copy any check for \$15 or more, and attach the copies to your copy of this sheet. **All contributions of \$250 or more must receive a written acknowledgement from SOVA for their taxes. If goods or services are exchanged, receipts must be issued for contributions of \$75 or more.** Each area is responsible for their own tax receipts and for keeping copies of all revenue (copies of checks) in case of audit. Please contact SOVA if you need assistance. Deposit slips must also be attached.*

Write the total for each type of revenue in this deposit on the appropriate line:

	Amount:	Additional Information:
4020 Foundations	_____	_____
4040 Individuals	_____	_____
4050 Workplace Campaigns	_____	_____
4060 Businesses	_____	_____
4080 Service Clubs/Organizations	_____	_____
4120P Polar Plunge	_____	_____
4120 Misc. Fundraisers	_____	_____
6110 Other Revenue	_____	_____
		Description of other revenue.

**DEPOSIT TOTAL:** \_\_\_\_\_

Printed name of area volunteer who deposited the money: \_\_\_\_\_

Contact phone number or email: \_\_\_\_\_

Signature of area volunteer who deposited the money: \_\_\_\_\_

*This form must be completed and mailed with check copies and a date-stamped deposit slip to SOVA, Att: Area Accountant. Mail to SOVA, Att: Area Accountant, 3212 Skipwith Road Ste 100, Richmond, VA 23294. Email to [areaaccounting@specialolympicsva.org](mailto:areaaccounting@specialolympicsva.org). Fax to (804) 346-9633.*

*Revised 7/25/17*