







Tour de Cure Deposit Slips

If you mail donation checks to the local ADA office, use one of these deposit slips to ensure we credit the amount to your total.

 DEPOSIT SLIP DATE _____ AMOUNT _____ YOUR NAME _____ <i>Should this money be credited to anyone other than yourself?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please write on the back of this slip, the names of those who should receive credit and the amount each one should be credited.	 DEPOSIT SLIP DATE _____ AMOUNT _____ YOUR NAME _____ <i>Should this money be credited to anyone other than yourself?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please write on the back of this slip, the names of those who should receive credit and the amount each one should be credited.
 DEPOSIT SLIP DATE _____ AMOUNT _____ YOUR NAME _____ <i>Should this money be credited to anyone other than yourself?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please write on the back of this slip, the names of those who should receive credit and the amount each one should be credited.	 DEPOSIT SLIP DATE _____ AMOUNT _____ YOUR NAME _____ <i>Should this money be credited to anyone other than yourself?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please write on the back of this slip, the names of those who should receive credit and the amount each one should be credited.
 DEPOSIT SLIP DATE _____ AMOUNT _____ YOUR NAME _____ <i>Should this money be credited to anyone other than yourself?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please write on the back of this slip, the names of those who should receive credit and the amount each one should be credited.	 DEPOSIT SLIP DATE _____ AMOUNT _____ YOUR NAME _____ <i>Should this money be credited to anyone other than yourself?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please write on the back of this slip, the names of those who should receive credit and the amount each one should be credited.

Make additional copies of these forms as needed.