

DATE		D E P O S I T S
TO		
FOR		
SUBTOTAL		
G.S.T. AMOUNT		
G.S.T. NO.	OTHER TRANSACTIONS	
<input type="checkbox"/> TAX DEDUCTIBLE	BALANCE	

DATE

M	M	D	D	Y	Y	Y	Y
M	M	D	D	Y	Y	Y	Y

PAY TO _____
 THE ORDER OF _____

\$

_____ 100
DOLLARS

FOR _____
 CPA Q&E 99-01C



Teller Stamp Here

Endorsement - Signature or Stamp

BACK/ENDOS