

Currency/Coin Order

Requested Pick-Up Date: Requested Pick-Up Time:		Requested by: Release order to:		
Currency	<u>Amount</u>	<u>Coins</u>	<u>Amount</u>	
\$1 Bills:	\$	Pennies:	\$	
\$5 Bills:	\$	Nickels:	\$	
\$10 Bills:	\$	Dimes:	\$	
\$20 Bills:	\$	Quarters:	\$	
\$50 Bills:	\$	Half Dollars:	\$	
\$100 Bills:	\$	Dollar Coins:	\$	
Total:	\$			
Please	e fax to the Operati	ions Department, Fax	Number: 405.286.0972	
For bank use only	y:			
Order filled by:		Order	Order verified by:	
Date order filled:		Bag# Bag# Bag#	Amt\$ Amt\$ Amt\$	