

St. Lucie Public Schools Report of Monies Collected

Teacher/Sponsor: _____ Date: _____

Class/Club: _____ Account #: _____

Purpose: _____

	SOURCE (If from students, list names separately)	RECEIPT Number	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
	Total Cash	Add	Total Check
\$	+	\$	=
			Total Amount
			\$

I hereby certify that the above funds are all received by me for deposit into the school's internal account:

x _____
Sponsor's Signature Dated

Received by: x _____
Bookkeeper/Secretary Dated

White: Bookkeeper/Exec. Secretary Canary: Teacher/Sponsor Submit all copies to the Bookkeeper who will distribute copies as indicated.