



FUNDS RECEIVED FORM FOR SCHOOL-GENERATED FUNDS

Category Name:	
Source:	
Purpose of Funds:	

AMOUNT OF FUNDS: \$ _____

Cheques	
Amount on Cheque	
Total:	\$

Bills		
	Qty	Amount
\$5.00		
\$10.00		
\$20.00		
\$50.00		
\$100.00		
Total:		\$

Rolled Coins		
	Qty	Amount
\$0.01		
\$0.05		
\$0.10		
\$0.25		
\$1.00		
\$2.00		
Total:		\$

Loose Coins		
	Qty	Amount
\$0.01		
\$0.05		
\$0.10		
\$0.25		
\$0.50		
\$1.00		
\$2.00		
Total:		\$
Summary		
Bill Total:		\$
Total Rolled Coin:		\$
Total Loose Coin:		\$
Coin Total:		\$
Total Cash:		\$
Total Cheques:		\$
Total Deposit:		\$

Name: _____

Signed by: _____ Date: _____

Activity Coordinator

Retain a copy for your files.

FOR OFFICE USE ONLY

Actual Funds Counted \$ _____

Difference: \$ _____

Counted by: _____ Date: _____

Note:

1. Any differences must be reported directly to the individual who submitted the form.
2. If applicable, attach a copy of the class list.