

Washington Elementary PTA **FUNDS RECEIVED FORM**

DATE _____

INCOME/FUNDRAISING ACTIVITY: (ex. Book Fair Proceeds):

BUDGET CATEGORY (ex. Media Center) _____

FUNDS RECEIVED:

COINS: \$ _____

CURRENCY: \$ _____

CHECKS: \$ _____ # of CHECKS: _____
(Count of checks received)

TOTAL FUNDS RECEIVED \$ _____

The undersigned certify that the funds shown above were received for PTA activities and properly accounted for in accordance with the WashinGTon Elementary PTA Money Management Policy, and are to be credited to the appropriate PTA account as noted.

Signature of Counter* _____ Date _____

Signature of Counter/Witness* _____ Date _____

Committee Chair Signature* _____ Date _____

*PLEASE MAKE SURE THIS FORM IS FILLED OUT COMPLETELY, ALL SIGNATURES ARE REQUIRED!

FOR TREASURER’S USE ONLY:

DATE RECEIVED BY TREASURER _____ INITIALS _____ AMOUNT RECEIVED \$ _____

DATE OF DEPOSIT: _____ AREA(S) AND CATEGORY(IES) CREDITED: _____