PROCEDURES FOR CASH HANDLING – LOCAL RECEIPTS
FOR THE GENERAL AND ASSOCIATED STUDENT BODY FUNDS

All fundraisers, field trips, or any special class activities involving the collection of monies are subject to prior approval by the building principal or ASB student council.

All monies collected in the school building by school staff for any purpose are considered the property of the district be it General or ASB Fund monies.

Field trips or other class activities using ASB monies to cover the costs should be of an optional, non-credit, extracurricular nature, outside of the regular curriculum.

<u>All monies, UPON RECEIPT, are to be:</u>

- ❖ Each transaction **MUST** be receipted on a pre-numbered receipt that includes district/school name.
- ❖ Counted immediately (if you have time to collect it—make sure you have time to count it.)
- ❖ A *Cash/Check Transmittal Receipt* form **MUST** accompany all deposits submitted to the building secretary.
- ❖ Cash/Checks shall be transmitted **INTACT*** to the building secretary for verification of totals and deposit in the district depository accounts at ___________________ Bank.
- ❖ Deposits are to be enclosed in a manila envelope with an identifier noted on the outside when given to the building secretary.

***Note: Intact means that the cash and check totals recorded on the transmittal form upon receipt, remains the same as recorded when transmitted to the school office. Do NOT make change from monies that have been counted or receipted for deposit.**

<u>Checks:</u>

- ❖ Checks are to be made **payable to the _________ SCHOOL DISTRICT, ________ HIGH SCHOOL, _________ MIDDLE SCHOOL, __________ ELEMENTARY, ETC.**
- ❖ Checks should **NEVER** be made **payable to any individual staff person**.
- ❖ Checks **may NOT be cashed** from the General or ASB Funds.
- ❖ Checks **may NOT be for more that the amount of purchase**.
- ❖ Checks **may NOT be accepted** if they have been **post-dated**.

<u>Completion of Receipts:</u>
An official numbered district/building receipt for all monies received is to be issued by the building/ASB secretary to the group submitting the deposit after totals have been verified and before deposit in the General Fund, Hot Lunch or ASB depository accounts at Key Bank. **Keep receipts for verification of deposits**.

The "Cash" or "Check" box on the receipt must be marked to indicate whether the money received was in the form of cash or a check. If a mixture of cash and checks is received, note the amount of each on the receipt. The school secretary (or person verifying totals) must endorse each check immediately upon receipt.

<u>WHEN IN DOUBT</u> OF ANY OF THE PROCEDURES IN HANDLING CASH OR SUPERVISING A FUND RAISING ACTIVITY—PLEASE **<u>ASK</u>** YOUR ASB ADVISOR, ASB SECRETARY OR BUSINESS MANAGER . HOPEFULLY, THIS WILL HELP TO AVOID ANY MESSY CLEAN-UPS.

Attachments: General Fund and ASB Fund Transmittal Forms

____________ SCHOOL DISTRICT NO. _____
GENERAL FUND CASH/CHECKS RECEIPT TRANSMITTAL FORM

Date of Deposit: ____________________ Deposit Total: $_________________________

Audit Trail Cash/Check Breakdown

Check Tape
(attach below)

Checks Total: = ______________

Currency

________ x $ 1.00 = ______________

________ x $ 5.00 = ______________

________ x $10.00 = ______________

________ x $20.00 = ______________

________ x $50.00 = ______________

TOTAL ______________

Coin – Rolled

.01 x $ .50 = ____________

.05 x $2.00 = ____________

.10 x $ 5.00 = ____________

.25 x $10.00 = ____________

.50 x $20.00 = ____________

TOTAL ____________

Coin – Loose

.01 = ____________

.05 = ____________

.10 = ____________

.25 = ____________

.50 = ____________

TOTAL ____________

Daily Cash Total (Actual): $_____________________

Cash Machine/Currency Re-Cap:

Total income (Tape): _______________

Refunds: - _______________

Card/Cash Correction: _______________

Total Adjusted Income: _______________

Actual Cash/Checks: _______________

+Over/-(Short): _______________

Credit Revenue Account #: ___________________ Receipt #: _____________________________

Counted by: _______________________________ Verified By: ___________________________

____________ SCHOOL DISTRICT NO. _____
ASB FUND CASH/CHECKS RECEIPT TRANSMITTAL FORM

Date of Deposit: ____________________ Deposit Total: $_________________________

Audit Trail Cash/Check Breakdown

Check Tape
(attach below)

Checks Total: = ______________

Currency

________ x $1.00 = ______________

________ x $2.00 = ______________

________ x $5.00 = ______________

________ x $10.00 = ______________

________ x $20.00 = ______________

TOTAL ______________

Coin – Rolled	**Coin – Loose**
.01 x $ .50 = ____________	.01 = ____________
.05 x $ 2.00 = ____________	.05 = ____________
.10 x $ 5.00 = ____________	.10 = ____________
.25 x $10.00 = ____________	.25 = ____________
.50 x $20.00 = ____________	.50 = ____________
TOTAL ____________	TOTAL ____________

Daily Cash Total (Actual): $_____________________

Currency/Check/Coin Re-Cap:

Check Tape Total: _______________

Currency Total: _______________

Coin Rolled Total: _______________

Coin Loose Total: _______________

Cash Box Startup - _______________ (deduct)

TOTAL DEPOSIT: $________________

Credit Revenue Account #: ____________________ Receipt #: _______________________________

Counted by: _________________________________ Verified By: _____________________________

Advisor's Name: _____________________________