

## **Money Collection Form**

Teacher's Signatu	ner's Signature:raiser/Activity:	[	Date:			
Fundraiser/Activ		Fund Acco	ount:			
List each stude	ent's information completely. All ch	ecks collected must ha	ave a check numb	er listed.		
	lected must be listed and this list m					
No money wil	l be accepted without this list.					
Date	Student's Name	Amount	Cash or	Check#		
		Received	Check?			

Secretary Signature

Date

Receipt #

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	\$			
otal Deposit: \$_				
Possist #	 Cocnote	anaturo		ata
Receipt #	Secretary Si	gnature	Di	ate