RECEIPT TRANSMITTAL

FROM: (School/Dept.) _____ DATE: _____

		ACCT. NUMBER	AMOUNT
ABATEMENTS:			
1)	Refunds or current expenditures (telephone calls, duplicate pmts., etc)		
2)			
3)			
REVENUE:			
1)	Rental of school facilities	2-1910	
2)	Lunch (Student Receipts)	6-1610	
3)	Lunch (Other Food Sales)	6-1690	
4)			
5)			
6)	OTHER REVENUE		
	a. Student sales & fines	1-1990	
	b. Pay for damaged property	1-1990	
	c. Sales of supplies, services, scrap iron, junk, etc. (non-inventory items)	1-1990	
	d. Donations		
	e. Refunds that cannot be abated or adjusted against current year expenditures (i.e. prior yr. refunds)		
	f.		
	g.		
	h.		
		TOTAL =	

_____
SIGNATURE OF PRINCIPAL/SUPERVISOR

RECEIVED BY: _____ DATE RECEIVED: _____

Complete in duplicate and submit BOTH copies to the Business Services Office. When signed, one copy will be returned to you. This form is to be submitted by principals/supervisors when turning in any money to the District Office.

(11/00) WHITE: BUSINESS SERVICES YELLOW: RETURN TO SCHOOL/DEPARTMENT