Bridgeport Independent School District
Sales Receipt Form

Complete and submit to the campus office along with the completed deposit slip and deposit bag tag

Account/Club Name: _____

Funds Collected for the event of: _____ Acct # _____

ITEM SOLD	QUANTITY	UNIT PRICE	TOTAL $ COLLECTED

Primary Sponsor/Designee Signature

Secondary Sponsor/Designee Signature

Primary Sponsor/Designee Name / Title

Secondary Sponsor/Designee Name / Title

Money Count (to be completed by sponsor)

Checks		**Quarters**	
$100s		**Dimes**	
$50s		**Nickels**	
$20s		**Pennies**	
$10s		**Other**	
$5s		**Total**	
$1s		**Deposit Bag #**	

For Sponsor Records

Account Beginning Balance	
This Transaction	
New Balance	