

STUDENT RECEIPT LIST

RECEIPT # _____

Teacher/Employee: _____

Date: _____

Money collected for: _____

(Use a separate list for each purpose)

Name of Club/Organization (if applicable) _____

STUDENT	AMOUNT		STUDENT	AMOUNT	
	Cash	Check		Cash	Check
SUBTOTAL			SUBTOTAL		
Money collected from students, must be deposited daily in the principal's office			TOTAL		