

Carroll Middle School PTA
FUNDS RECEIVED FORM

DATE: _____

FUNDRAISING ACTIVITY: _____

BUDGET CATEGORY: _____

FUNDS RECEIVED:

COINS: \$ _____

CURRENCY: \$ _____

CHECKS: \$ _____

TOTAL FUNDS RECEIVED \$ _____

The undersigned certify that the funds shown above were received for PTA activities and properly accounted for in accordance with the York PTA Money Management Policy, and are to be credited to the appropriate PTA account as noted.

Signature of Counter _____ Date _____

Signature of Counter/Witness _____ Date _____

Committee Chair Signature _____ Date _____

FOR TREASURER'S USE ONLY:

Amount Received: \$ _____ Date _____

Specific Budget Items credited: _____

Comments: _____

Treasurer's Signature: _____

Reconciled with financial report. By _____ Date _____

Reconciled with bank statement. By _____ Date _____