

Cash Receipt Sheet

School name _____ Organization name _____ Account # _____

Purpose for collecting money _____

#	Name	Date paid	Amount paid	Cash	Check	Collector's Initials
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
Grand total collected						

Summary Tally	Total \$
Checks	
Bills	
Ones	
Fives	
Tens	
Twenties	
Fifties	
Hundreds	
Other	
Coins	
1.00	
0.50	
0.25	
0.10	
0.05	
0.01	
Grand total	

Financial Secretary Use:

Date received _____

Amount received _____

Receipt # _____

Taxable yes no

Financial secretary signature _____

- Complete Summary Tally
- Double check your total before turning in money
- Sign
- Tax-free fundraiser yes no

Signature of person turning in money