

Middle Creek High School - Stampede Club

Athletic Team Cash Receipts

Date:

Sports Team:

Person responsible for event:

Email address:

Phone:

Fundraising Event:

If not a fundraiser, why money has been collected:

Total of Funds Received

	Count	Total \$ Amount	ACCOUNTING USE ONLY	Verification	
Total Checks Received:					
Cash Received: (\$100's)					
Cash Received: (\$50's)					
Cash Received: (\$20's)					
Cash Received: (\$10's)					
Cash Received: (\$5's)					
Cash Received: (\$1's)					
Cash Received: (cents)					
Total of ALL Received					

Person Completing Form

Print Name:

Email address:

Phone:

Signature:

Accounting Use Only

Deposit Date:

Date Recorded:

Recorded Initial:

Account Description: