

THE SCHOOL DISTRICT OF ESCAMBIA COUNTY
Accounting Operations - School Internal Funds
75 North Pace Blvd., Pensacola, FL 32505
Phone: 429-2917

**MONIES COLLECTED
FORM**

Account Number

Date

(SOURCE OF COLLECTION)

Ck. No.	IF FROM STUDENTS, LIST EACH NAME ON A SEPARATE LINE. (In addition to the student's name, indicate the parent's last name, if different than the student's last name.)	AMOUNT
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		

TOTAL FOR DEPOSIT

- I was present while
the funds were verified.
 I placed money and
Unverified Funds form
in lockbox.

I do hereby certify that the above funds were
received by me from the source indicated.

Teacher/Sponsor

Received and verified by: _____

Bookkeeper/Secretary

Date

Fill out this form in duplicate - Both copies to Bookkeeper who will return one signed copy to the Teacher/Sponsor.

9500-INT-016

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