



Funds Received Form

Date: _____

Fundraising Activity _____

If Membership dues, indicate the # of NCPTA members included _____

Funds Received:

Coins: \$ _____

Currency: \$ _____ (itemize on reverse)

Checks: \$ _____ (itemize on reverse)

PayPal \$ _____

Total Funds Received \$ _____

The undersigned certify that the funds shown above were received for PTSA activities and are properly accounted for in accordance with WYMLA PTSA policies and standing rules.

Signature of Counter _____ Printed name: _____

Signature of Witness _____ Printed name: _____

Funds forwarded to Treasurer on _____ by: _____

printed name:

<i>For Treasurer's Use Only:</i>	
Amount Received: \$ _____	Date _____
Specific Budget Items(s) Credited: _____ _____	
Comments:	
Treasurer's Signature: _____	
Printed Name:	

If you have questions regarding this form, please refer to WYMLA PTSA Standing Rules, eff. 9/15