

SOL FEINSTONE ELEMENTARY SCHOOL PTO COLLECTION OF FUNDS FORM

NAME: _____

ADDRESS: _____ TEL. #: _____

EMAIL: _____

MONIES COLLECTED

FOR ACCOUNT/COMMITTEE _____
FUNDS COLLECTED FOR (DESCRIBE) _____

TOTAL NUMBER OF CHECKS _____

TOTAL – CHECKS COLLECTED \$ _____

TOTAL – CASH COLLECTED \$ _____

GRAND TOTAL OF CHECKS & CASH \$ _____

SIGNATURE _____ DATE _____

GUIDELINES FOR COLLECTION OF FUNDS

- **SUBMIT ANY MONEY COLLECTED WEEKLY. DO NOT HOLD ONTO CHECKS (SOME EXPIRE!)**
- **REMOVE ALL STAPLES FROM CHECKS**
- **REMOVE ALL STAPLES FROM ANY CASH COLLECTED**
- **MAKE ARRANGEMENTS WITH THE TREASURER TO PICK UP CASH.**
- **DO NOT LEAVE CASH IN THE PTO ROOM**
- **CONTACT CHRISTINE MYERS, PTO TREASURER, WITH QUESTIONS:
215-497-0113 OR SFEPTOTREASURER@GMAIL.COM**

(To be completed by the Treasurer)

Received: TOTAL NUMBER OF CHECKS _____
TOTAL – CHECKS COLLECTED \$ _____
TOTAL – CASH COLLECTED \$ _____

GRAND TOTAL OF CHECKS & CASH \$ _____

TREASURER'S SIGNATURE _____ DATE _____