

Bridge Valley Cash Receipt Log

Classroom/Event: _____ Date: _____

CC/Committee Chair: _____

Reason for Collection: _____

Amount Requesting: _____ *You can not ask for more than \$35

THIS FORM AND COLLECTED MONEY SHOULD NOT BE SENT TO THE OFFICE AND IS FOR RECORD KE THE MONEY COLLECTED SHOULD BE USED FOR THE SPECIFIC EVENT LISTED ON THIS FORM.

	<i>Parent Name</i>	<i>Student name</i>	<i>Amt Donated</i>	<i>Payment Type</i>	
1			\$ -	cash	check
2			\$ -	cash	check
3			\$ -	cash	check
4			\$ -	cash	check
5			\$ -	cash	check
6			\$ -	cash	check
7			\$ -	cash	check
8			\$ -	cash	check
9			\$ -	cash	check
10			\$ -	cash	check
11			\$ -	cash	check
12			\$ -	cash	check
Total Collected:			\$ -		

CC/Committee Chair Signature: _____

****Please return this and a copy of the receipt to your grade TC.***

EPING ONLY.