

_____ School

CLUB / ORGANIZATION RECEIPT RECORD

Date: _____

Activity: _____

Organization Name: _____

	Student Signature	Amount		Purpose
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
Total \$				

 Signature of Student Rep.

 Signature of Advisor

>>>>>>>>> **NOTE: ATTACH ASB APPROVED MONEY DEPOSIT FORM** <<<<<<<<<<