

Bay Village Early Childhood PTA

Fund Collection Form

Cash Receipts

Ref. No.: _____

Date: _____

	Member Name	Amount Paid		Check No.
		By Check	By Cash	
1				
2				
3				
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39				
40				
Total Collected:				

Committee Chairperson: _____

Treasurer: _____

For Treasurer's Use Only	Amount Deposited: _____
	Date Deposited: _____
	Accounts: _____