_____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<<<<<<<<<<<