

DEER RIVER HIGH SCHOOL

Activity Fund Cash Receipt

Date _____

Activity Fund Name _____

Event/Fundraiser Name _____

Date(s) of Event/Fundraiser _____

Total amount of cash turned in \$ _____

Name of Advisor/Coach _____

Name of Student Treasurer/Captain _____

Office Use Only

Money received by _____

Amount received \$ _____

DEER RIVER HIGH SCHOOL

Activity Fund Check Request

Date requested _____

Date needed _____

Pay to the order of _____

Address _____

Activity Fund Name _____

Name of Advisor/Coach _____

Name of Student Treasurer/Captain _____

Explanation for disbursement. Include copies of all invoices/receipts. Checks will not be written without an invoice/receipt attached.

Total Amount of Check: \$ _____

Advisor Signature _____

Office Use Only

Approved by _____

Paid by Check # _____ Date paid _____