

WESTERN RESERVE LOCAL SCHOOLS STUDENT ACTIVITY - PAY-IN ORDER

To Be Completed by Activity Treasurer:

Western Reserve Local Student Activity Program Fund, Berlin Center, OH 44401

Date: _____

To the Credit Of: _____
Activity Fund Program Name

Activity Fund Number: _____

Source: _____

Currency							\$ -
Coins							\$ -
Checks (list names and amounts in boxes below)							
NAME	AMT.	NAME	AMT.	NAME	AMT.	AMT.	
	\$ -		\$ -		\$ -	\$ -	
	\$ -		\$ -		\$ -	\$ -	
	\$ -		\$ -		\$ -	\$ -	
	\$ -		\$ -		\$ -	\$ -	
	\$ -		\$ -		\$ -	\$ -	
	\$ -		\$ -		\$ -	\$ -	
	\$ -		\$ -		\$ -	\$ -	
						Check Total	\$ -
						Total Pay-In	\$ -

(Activity Treasurer)

(Activity Sponsor)

ATTACH DUPLICATE COPY OF DEPOSIT SLIP

TO BE COMPLETED BY CLERK - CUSTODIAN

Amount Received: _____

Date Received: _____

Name of Payee: _____

Receipt Number

Signed: _____
Cashier

FUND	Receipt	SCC

Fund	OBJ	SCC