



**Beck Family Volunteers Events and Fundraisers
Cash & Check Receipt**

Name of the event: _____ Today's Date: _____

Location of the event: _____ Date of the event: _____

BFV member/teacher responsible for organizing the event:

Name: _____ Phone Number: _____

*****When money is collected for an event, DUAL CONTROL MUST take place. Two people must count, verify and sign off on all cash and/or checks collected for each event. NO EXCEPTIONS! During an actual event when lots of cash is collected, three people must count, verify and sign below. *****

\$100 Bills	_____
\$ 50 Bills	_____
\$ 20 Bills	_____
\$ 10 Bills	_____
\$ 5 Bills	_____
\$ 2 Bills	_____

\$ 1 Bills	_____
Coin Dollars	_____
Quarters	_____
Dimes	_____
Nickels	_____
Pennies	_____

Total Amount of Cash Received: \$ _____

Total Amount of Checks Received: \$ _____ Number of Checks Received: _____

Total Amount Collected: \$ _____

Cash/Checks Counted by:

1) Print Name _____ Signature _____ Amt\$ _____

2) Print Name _____ Signature _____ Amt\$ _____

3) Print Name _____ Signature _____ Amt\$ _____

For BFV Ways and Means use only:

Amount Received: Cash \$ _____ Checks _____ Initials _____ Date _____

Deposited on _____ Deposit Notes _____

Date Entered/Logged: _____