

FIELD TRIP MONEY COLLECTION FORM

The money collected as indicated below is for _____

NO.	PRINTED NAME	AMT.	SIGNATURE OF STUDENT	TEACHERS' INITIALS	DATE
1					
2					
3					
4					
5					
6					
7					
8					
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10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

This form is to be completed and turned in with a Transfer of Cash Form.

TOTAL	
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GL# 12-4-7430-000-(CCTR*)-7101-0-0000-0000 OR
 32-4-7810-000-(CCTR*)-7101-0-0000-0000

*CCTR (Cost Center)