

NEW HAVEN UNIFIED SCHOOL DISTRICT
Student Body Collection Report

Name of School: _____

Account Number to be Credited: _____

I. Depending on the cash control procedure used, the following additional information is required to be attached to this document when turning in cash/checks for deposit:

A. **Prenumbered Tickets**
Attach the Report of Ticket Sales

B. **Cash Register**
Attach the cash register tape

C. **Prenumbered Receipt Books**
Complete the following:

Beginning Receipt Number: _____

Ending Receipt Number: _____

D. **Tally Sheet**
Attach the Tally Sheet

II. Please complete and attach the Proof of Collection Report.

III. Approvals/Verification:

Student Advisor

Date

Student Body Bookkeeper

Date