Manhattan Beach Unified School District
325 South Peck Avenue • Manhattan Beach • California 90266
(310) 318-7345 • FAX (310) 303-3823

DONATION COLLECTION VERIFICATION FORM

School Site: _____

Group/Organization: _____

Activity/Purpose: _____

Verified By: _____ Date of Submission: _____

COINS

_____	x	1¢	=	$ -
_____	x	5¢	=	$ -
_____	x	10¢	=	$ -
_____	x	25¢	=	$ -
_____	x	50¢	=	$ -
_____	x	100¢	=	$ -
		TOTAL	=	$ -

CURRENCY

_____	x	$1	=	$ -
_____	x	$5	=	$ -
_____	x	$10	=	$ -
_____	x	$20	=	$ -
_____	x	$50	=	$ -
_____	x	$100	=	$ -
		TOTAL	=	$ -

CHECKS

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TOTAL NUMBER OF CHECKS 0

TOTAL $ -

GRAND TOTAL $ -

FOR BUSINESS OFFICE USE ONLY:

Received By: _____ Date: _____

Verified Deposit Amount: _____ Date Deposited: _____

SACS Account Line(s) for Expenses: _____