Summary Recap – ASB Deposit

**Name of School:**

**Name of Club:**

**Summary Recap ‑ ASB Deposit**

**Fiscal Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date Funds Received** | **Received from  Advisor/Teacher** | **Receipt Number** | **Deposit for (Identify Club  or Activity)** | **Amount Received** |
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|  |  | **Total Deposit** |  |  |

Submitted and Approved by:

Student Club Representative:

Signature, Title and Date

Club Advisor:

Signature, Title and Date

Principal/School Administrator:

Signature, Title and Date

Verified by ASB Bookkeeper:

Signature, Title and Date

Recorded in ASB Student Council Minutes on:

Date