Rockburn Elementary School PTA, Inc.
(Rockburn PTA)

Fund Receipt Form

Submit To: ROCKBURN PTA PRESIDENT OR TREASURER **Budget Year:** 2025-2026

PTA Contact Person & Email: _____

(person submitting form) **contact phone #:**_____

Breakdown of Funds Collected:

CASH			**COINS**			**CHECKS**
_____	$1	$_____	_____	Quarters	$_____	_____ Number of checks
_____	$5	$_____	_____	Dimes	$_____	
_____	$10	$_____	_____	Nickels	$_____	
_____	$20	$_____	_____	Pennies	$_____	
_____	$____	$_____				
	Total Cash:	**$_____**		**Total Coins:**	**$_____**	**Total Checks: $_____**

GRAND TOTAL: $_____

Budget Account/Line Item:

_____ $_____
_____ $_____
_____ $_____
_____ $_____
_____ $_____

GRAND TOTAL **$_____**

- If Receipt covers more than Budget Account/Purpose, then please provide explanation

Date Submitted: _____ Submitted by: _____
Signature

Accepted for Deposit By:

_____
Rockburn PTA Treasurer (or designee)

Deposit Date: _____ Treasurer's initials _____