FIELD TRIP ACCOUNTING FORM

Teachers are responsible for collecting money from their students and parents. When all the money has been collected, turn it in to Gretchen along with this form.

Teacher_________________________________________________________Date_____________

Destination of Trip________________________________________________________________

Date of Trip______________________________________________________________________

Total Cost of Trip: $________________________   (___Students @ $__________) Adults

Amount Collected: $________________________   (___Students @ $__________) Adults

Scholarships: $________________________   (___Students @ $__________)

BALANCE: $________________________

All money must be turned in to the office 2 days before the scheduled field trip!

_________________________________________________________  ____________
Teacher’s Signature     Date

Office Use Only:

Amount Received: $________________________

Field Trip paid by check#_____________________        Amount $ _______________

________________________________________________________ ____________
Secretary’s Signature Date

20 ___ X _____ = _____
10 ___ X _____ = _____
5 ___ X _____ = _____
1 ___ X _____ = _____

Coin___________________
Checks_________________

TOTAL ________________