To:	Business Services	Teacher name:			
From:		Grade:			
Enclosed please find:				\$	
(total) collected from the following students for the purpose of					

Please include below a class list that specifies whether cash or check was collected from each student. Please complete this form, and attach a Remittance Advice Form, and all cash & checks upon receipt and submit to the school Secretary or Clerk. All checks should be made payable to the Orinda Union School District (OUSD).

Student Name	Cash Amount	Check Amount
Subtotals:	\$	\$
Total A	\$	

Employee Collecting Funds						
Deposit submitted by	Signature	Date Submitted	Amount			
The purpose of funds collected						
Field Trips: Complete separate trip. Include this form, the Rem	Cash	\$				
checks (payable to OUSD) and immediately upon receipt.	Checks	\$				
apon rootpu	Total Deposit	\$				
School Office Verification						

School Office Verification					
School:					
Deposit verified by	Signature	Date Verified	Amount		
			\$		

Account Code for Deposit							
Fund	Resource	Goal	Function	School	Yr	District Use	Object

OUSD Business Office Verification and Deposit					
Deposit verified/deposited by	Signature	Date verified	Amount verified		