EHS PTSA RECEIPT OF FUNDS - HOLIDAY BAZAAR

DATE_____

Name	Check #	Amount							Please specify budget line item for "Other"	Total
		Bake Sale	Guide Book	Raffle	Vendor Box Lunches	Vendor Registration	Gift Wrap	Other		
TOTAL EACH COLUMN										

Verified by _____ Date _____

Verified by _____ Date _____

Treasurer's Signature _____ Date _____

Revised 10/2017