



TRANSMITTAL LIST
MONEY COLLECTED FROM STUDENTS

CAMPUS: _____

SPONSOR: _____
Print Name

CLUB: _____

DATE: _____ ROOM #: _____

PURPOSE: _____

	STUDENT NAME	AMOUNT	STUDENT SIGNATURE
1.			
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22.			

TOTAL COLLECTED: \$ _____ RECEIPT NUMBER: _____

Sponsor Signature/Date

Bookkeeper Signature/Date