

BEND LAPINE SCHOOLS
SINGLE PURPOSE MULTIPLE RECEIPT

Date _____
 Club or Activity Fund Name _____
 Description of Activity _____

Name of Payer	Amount	Paid Cash	Check Number
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

TOTAL COLLECTED THIS SHEET _____
Cash _____
Checks _____
Total _____

ADVISOR SIGNATURE _____