

2000755

RECAP OF COLLECTIONS

DEPOSIT TO ACCOUNT OF:		DATE OF COLLECTION	
Account Name			
OBJECT	PROGRAM	FUNCTION	SUB-LEDGER
00-	0000		-
SOURCE AN	AMOUNT		
		TOTAL COLLEC	CTED
Cash \$			
☐ Checks \$ ☐ Credit Card \$	SIGN	NED	/T
Credit Card \$ Sponsor/Treasurer PREPARE THIS FORM IN DUPLICATE. RCT Number (cash)			
Original - Secretary/T Copy - Depositor			

FM-1004 Rev. (08-17)