

## Hibbing Band Parents Organization Cash Receipt Form

		<b>Fundraiser</b>		
		<b>Chairperson Name:</b>		
<b>Date:</b>		<b>Co-Chair Person Name:</b>		
<b>Checks</b>		<b>Cash</b>		
<b>Check No.</b>	<b>Amount</b>	<b>Denominations</b>	<b>Qty</b>	<b>Total</b>
		\$ 1.00		
		\$ 5.00		
		\$ 10.00		
		\$ 20.00		
		\$ 100.00		
(A)Total		(B)Total Cash Received		
		Verified and approved by:		
		Chairperson Signature		
		Date		
Total amount given to Treasurer (A) plus (B)		Treasurer Signature		
		Date		