PHONE: PHONE #

Name Of Bank

PUBLIC

- TRIAL BALANCE-

		ACCOUNT TOTALS			ACCOUNT BALANCE	
COLUMN#	COLUMN (ACCOUNT) NAMES	DEBIT	CREDIT		DEBIT	CREDIT
В	CASH COLLECTIONS					
C	SHORT AND OVER					
D	CHECKING ACCOUNT			*		
F	OTHER CASH FUNDS AND INVESTMENTS					
G	CLEARING AND BOARD OF EDUCATION					
H	SALES TAX PAYABLE					
I	ENTERTAINMENTS, BAZAARS, CARNIVALS					
J	SALVAGE DRIVES					
K	SPECIAL SALES					
L	TRUST-					
M	TRUST-					
N	AUGMENTATION & ENRICHMENT EXPENSES					
0	EQUIPMENT PURCHASES					
P	GENERAL STUDENT BODY EXPENSES & INCOMES					
R	YEAR-END ADJUSTMENTS					
S	STUDENT BODY SURPLUS (FROM PRIOR YEAR)					
	TRIAL BALANCE TOTALS					

- BANK RECONCILIATION -

Name

Title

Principal

Administrator's Signature

S. A. A.

Persons Whose

Signatures

Are on File At Bank

TOTAL:

* Difference should be explained.

ADJUSTED CHECKING ACCOUNT BALANCE

SHOULD BE THE SAME AS IN TRIAL BALANCE.*

Branch			Assistant Principal
BALAN	CE PER BANK STATEMENT :	7/31/18	
ADD: I	DEPOSITS OF THIS MONTH'S COLLECTIONS NOT		
	YET CREDITED ON BANK STATEMENT		
DATE BANKED:			
	TOTAL:		
DEDUC	T: CHECKS ISSUED TO CLOSE OF THIS MONTH. BUT NOT CHARGED	ON BANK	
	STATEMENT (INCLUDE PRIOR MONTH CHECKS NOT YET CHARC	GED)	
CHECK NO.			

STUDENT BODY FINANCIAL CONDITION

NAME: Telephone: District:	START BY TYPING SCHOOL'S NAME HERE PHONE #		As of	7/31/2018
Undeposite	ce: Account (Debit Balance-Item D on Trial Balance)d Collections (Debit Balance-Item B on Trial Balance) A, Savings, etc. (Debit Balance-Item F on Trial Balance)			- -
4 DEDUCE		Cash:		
2. DEDUCT: To Board	of Equalization for Sales Tax (Accounts Payable)			- - -
		Subtotal:		- -
	S HELD IN TRUST OR RESERVED FOR SPECIFIC PUR bunts should not have debit balances on Trial Balances) ame: Board of Education/Clearing	POSES		
Trust L	TRUST-	- -		-
Trust M	TRUST-	- -		-
		Subtotal:		- -
4. TOTAL DE	CDUCTIONS - Item 2 and Item 3 Combined			
5. AVAILABI	LE CASH - Item 1 less Item 4			
Accounts I	ount with Debit Balances			- - -
	LE CASH, RECEIVABLES AND STUDENT BODY INVENTED BY STATE OF THE STATE O			
REMARKS:				
Original copy Duplicate- Sch	to: Student Body Finance Section nool Copy	Adı	ministrator's Sigr	nature

*If carried on Student Body Books