FORM D

Revised: 10/2020

STUDENT ACTIVITY ACCOUNT

BLANK EXAMPLE

*** All schools have been emailed their individual forms that contain their account #'s ***

CITY OF NEW BEDFORD

Schedule of Departmental Payments to Treasurer

School Name: Date:

GL String (Account #):

Treasury (Account #): Charge Code **ALLMISC**

From Whom	Source (cash, check #, etc)	Amount	Total
			$ -

SAA Advisor Signature:

Principal Signature:

To the City Treasurer:

The above is a detailed list of revenue collected by me, amounting in the aggregate of

0 Dollars

Receipt#

Maria

Principal Clerk, Treas.

CITY OF NEW BEDFORD

Schedule of Departmental Payments to Treasurer

School Name: 0.00 Date:

GL String: 0

Treasury: 0 Charge Code ALLMISC

From Whom	Source	Amount	Total
0	0	$ -	
0	0	$ -	
0	0	$ -	
0	0	$ -	
0	0	$ -	
			$ -

New Bedford, MA

To the Departmental Officer making the Payment

Received of: 0.00 , the sum of

0 Dollars

for collections, as per schedule of this date, filed in my office

City Treasurer

Receipt#

By