

SMITHSBURG YOUTH ATHLETICS

CASH/CHECK VERIFICATION FORM

Name of Person Collecting Monies: _____

Date Collected: _____

Sport/Activity: _____

Date Submitted: _____

Released To: _____

Participant Name	Amount	Description
------------------	--------	-------------

1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		

Signature/Date	
----------------	--

Sheet Total	\$	-
-------------	----	---

*** PLEASE MAKE NO MORE THAN 17 ENTRIES PER SHEET****