



Wakefield Forest Elementary PTA

4011 Iva Lane

Fairfax, Virginia 22032

703-503-2300

FUNDRAISER COLLECTION ENVELOPE

PROJECT NAME: _____

SUBMITTED BY: _____
Name and Phone Number

TOTAL # NUMBER OF CHECKS: _____

TOTAL \$ AMOUNT OF CHECKS: _____

TOTAL CASH (BILLS): _____

TOTAL CHANGE (COINS): _____

TOTAL # CREDIT CARD SLIPS: _____

TOTAL \$ AMT OF CREDIT CARD: _____

TOTAL DEPOSIT IN THIS ENVELOPE: (CHECK, BILLS, COINS, CREDIT CARD):

Is this a total accounting of Deposits for your fundraiser?

Yes _____ No, I will have future deposits _____

Date Submitted: _____

Received by: _____