

Plainville Community Schools
47 Robert Holcomb Way

Ticket Sales Report

- Plainville High School
- Middle School of Plainville
- Linden Street School
- Toffolon Elementary
- Wheeler Elementary

Name of Activity _____ Date _____

ADULTS _____ Amount Charged

Beginning No. _____

Ending No. _____

Total _____

STUDENTS _____ Amount Charged

Beginning No. _____

Ending No. _____

Total _____

TOTAL NO. OF TICKETS _____

Signature of Ticket Collector or Advisor/Teacher

Date

Cc: Administrator, Bookkeeper, Advisor/Teacher

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Expenditures/Reimbursement Report

- Plainville High School
- Middle School of Plainville
- Linden Street School
- Toffolon Elementary
- Wheeler Elementary

Name of Activity _____ Date _____

To Whom Check is issued: _____

Address: _____

Date Paid: _____ Amount Paid: _____

Receipts attached: _____

Explanation of Expenditure: _____

Check Number: _____ Order Paid By: _____
Treasurer/Secretary

Approved Payment:

Advisor for Activity

Administrator Ref. # - Line Item

Cc: Orig. with deposit, Administrator, Bookkeeper, Advisor/Teacher

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Fundraiser Request

- Plainville High School
- Middle School of Plainville
- Linden Street School
- Toffolon Elementary
- Wheeler Elementary

Description of Fundraiser _____

Fundraiser is for the benefit of: _____
(i.e. Athletic Team, PTO, Club, etc.)

Approved By:

Administrator or Athletic Director

Date

Cc: Administrator, Bookkeeper, Advisor/Teacher, Athletic Director