

PAY-IN ORDER

TO BE COMPLETED BY THE ACTIVITY TREASURER

ORC 9.38 requires deposits over \$1,000 to be deposited within 24 hours of receipt, less than \$1,000 within 3 business days of receipt.

Date _____

Licking Valley Local School District
1379 Licking Valley Rd NE, Newark, OH 43055

Student Activity Program Fund

To The Credit Of _____
 (Activity Program Fund)

Activity Account No. _____

Source _____

Coins	
Currency	
Checks (List Separately)	Last Name, First Name, Check#
Total Pay-In	

 ACTIVITY TREASURER

Approved: _____
 ACTIVITY SPONSOR

TO BE COMPLETED BY STUDENT ACTIVITY COORDINATOR

EXPLANATION OF OVERAGE OR SHORTAGE

Amount Received: _____

Date Received: _____

Name of Payee: _____

Signed: _____
 STUDENT ACTIVITY COORDINATOR