

**Licking Valley Local School District
Student Activity Accounts
Sales Follow-Up**

Date: _____

Student Activity Name: _____ Student Activity Advisor: _____

Student Activity Account #: _____

Vendor Name & address:

Items purchased: _____

Revenue:

Date	Pay-In #	Amount
Total Revenue		\$

Expenses:

Invoice Date	PO #	Amount
Total Expenses		\$

Reconciliation of items sold: (Total Amount Collected Should Equal Total Deposits)

# of Items Sold		Price Per Item		Total Amount Collected
	X		=	
	X		=	
	X		=	
	X		=	
	X		=	
	X		=	
Total Collected			=	\$

Total Revenue - Total Expenses = Profit/(Losses)

_____ - _____ = _____

Explanation of any differences: