## ASSOCIATED STUDENTS OF RIVERSIDE COMMUNITY COLLEGE Fund Raising Receipts Declaration Form

PART 1	[To be completed prior to event and copy left with Auxiliary Business Services]				
Club/Organization:					
Trust Account Number:		_Have you requested a cash advance?			
Type of Activity:					
Date(s) of Activity:					
Club/Orga	nization Advisor	Coordinator, Student Activities			

PART 2	[To be completed promptly upon conclusion of fund raising activity & returned To Auxiliary Business Services (ABS) Cashier Office with deposit]				
Funds to be deposited at (ABS) Cashier office:					
Total Cash	n: <u>\$</u>	-			
Total Checks:			For ABS use only		
Subtotal:		_	Date Deposited:		
Subiolal.		_	ABS Cashier:		
Less Change Fund:		_to be deposited	Receipt No:		
Amount R	eceived:	_to be deposited			
Club/Organization Treasurer Club/Organization Advisor					