

Highlands Parents & Friends Association
Parents Association

Payment Request

Please complete the following details and attach your receipts.

| Date | Event | Details (or put see receipt) | |
|-------------|------------------------|-------------------------------------|--|
| 12/2/2021 | Variety Show 3/12/2021 | Purchase supplies to sell | |
| 12/3/2021 | Variety Show 3/12/2021 | Purchase supplies to sell | |
| 12/3/2021 | Variety Show 3/12/2021 | Purchase supplies to sell | |
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Total

Name _____ Felicia Ekemezuma **Signature** *F. Ekemezuma* **Date** _____

| |
|---|
| <p>Cheque No. Issued</p> <p>Date</p> |
|---|

| Amount |
|--------|
| 131.11 |
| 15.54 |
| 1.5 |
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| |
| 148.15 |

3/13/2022

**Highlands Parents and Friends Association
EVENT COUNT SLIP**

In Respect of: _____ **Date:** _____

| | |
|-------------------|--|
| £50 notes | |
| £20 notes | |
| £10 notes | |
| £5 notes | |
| £2 coins | |
| £1 coins | |
| 50p | |
| 20p | |
| 10p | |
| 5p | |
| 2p | |
| 1p | |
| Cash Total | |
| Cheques | |
| Bank Total | |

Add:

| Expenses Paid Cash | Amount |
|---------------------------|---------------|
| | |
| | |
| | |
| | |
| | |
| Total Expenses | |

Total Takings _____

Counted By: _____ **Date:** _____

Person 1
(Print Name) _____ **Signature** _____

Person 2
(Print Name) _____ **Signature** _____