



## Document ID\*

- ### Payment Record

Payer name (please print)	Payer signature	Date	Amount for personal copies	Amount for supplies	Amount for telephone	Amount for manuals	Amount for other (describe)	Total amount of money given	Initials of person receiving money
Totals									

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Signature of person who collected the cash, verifying totals

Date
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Signature of person preparing deposit, verifying totals
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Date
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When recording this receipt in the deposit software, include the document ID in the comments field.