



Independent Activity Fund (IAF) Remittance Slip

Department of Financial Services
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

MCPS Form 280-34
September 2012
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Directions on Page 2.

Part I. To Be Completed by the Remitter (Teacher/Sponsor)

Cash	\$		Checks	\$		Grand Total	\$		
							Date Collected	/	/

_____ *Teacher/Sponsor Name (Print)* _____ *Class & Class Period or Vendor #, if applicable*

_____ *CREDIT to IAF Account (name)* _____ *IAF Account #* _____ *IAF SubAcct #*

_____ *Purpose of Funds Collected* _____ *Total # Checks*

Were these funds collected as course-related fees? (check one)		No <input type="checkbox"/>	Yes <input type="checkbox"/>	Course # <input type="text"/>
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Check/ID# <small>(optional)</small>	Student Name (Last, First) / Payer Name	Cash (\$)	Checks (\$)
GRAND TOTAL		Total from Page 1	\$
\$		Total from Page 2, if applicable	\$

Teacher/Sponsor Verification of Amount Remitted _____
Teacher/Sponsor Signature Required

Part II. To Be Completed by the School Financial Agent

The above listed funds have been accepted by the finance office. A receipt will be furnished upon verification.

Received by _____ Date ____/____/____
Receipt # _____

Check/ID# (optional)	Student Name (Last, First) / Payer Name	Cash (\$)	Checks (\$)
Total Page 2		\$	\$

DIRECTIONS FOR COMPLETION OF THE IAF REMITTANCE SLIP

REMITTER Teacher/Sponsor: Complete PART I in entirety.

1. Indicate the date funds were collected. Remember, funds are to be remitted on a daily basis!
2. List each student/payer’s name with amount paid as cash or check. Check number or student ID number may be included in the space provided if required by school financial office. Teacher/Sponsor may provide this information in a separate list if all required information is included, then write “SEE ATTACHED LIST” across remittance detail in Part I.
3. Count the currency and confirm the total cash amount remitted.
4. Count the checks and verify the total number of checks in remittance; confirm the total amount of checks remitted.
5. Sign at the bottom of Part I to confirm that you have verified remittance amount.

SCHOOL FINANCIAL AGENT (Main Office Designee): Complete PART II in entirety.

1. Count the currency and confirm the cash amount is correct. Count the checks and confirm the number of checks and amount of checks is correct.
2. If the funds are course related fees, confirm that the fee is registered on the school’s approved fee list.
3. Sign and date the form.
4. Receipt the funds; write the receipt number on IAF Remittance Slip. Send copy of receipt to Teacher/Sponsor to attach to their copy of the IAF Remittance Slip.