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## Year – End Accounts Receivable Balances



**School:**

**Fiscal Year:**

**This form should be used to list all amounts owed to the school that have not been received at the end of the fiscal year. Attach all documentation of funds owed to the school.**

| <b>Name</b> | <b>Invoice<br/>Number/<br/>Descri tion</b> | <b>Date of<br/>Origination</b> | <b>Outstanding<br/>Balance</b> |
|-------------|--------------------------------------------|--------------------------------|--------------------------------|
|-------------|--------------------------------------------|--------------------------------|--------------------------------|

**Total**

**Preparer's Signature / Date**

**Principal's Signature / Date**

**Year – End Accounts Payable Balances**

**School Name**

**Fiscal Year** \_\_\_\_\_

**This form should be used to list all outstanding balances (accounts payable) at the end of the fiscal year. Please attach a copy of all invoices to this form.** \_\_\_\_\_

| <b>Name</b> | <b>Invoice<br/>Number</b> | <b>Date of<br/>Origination</b> | <b>Outstanding<br/>Balance</b> |
|-------------|---------------------------|--------------------------------|--------------------------------|
|-------------|---------------------------|--------------------------------|--------------------------------|

**Total**

\_\_\_\_\_  
**Preparer's Signature / Date**

\_\_\_\_\_  
**Principal's Signature / Date**