



THE SCHOOL DISTRICT OF ESCAMBIA COUNTY, FLORIDA

OFFICIAL RECEIPT

"Making A Positive Difference"

DATE:

RECEIPT NUMBER:

REFERENCE:

RECEIVED FROM:

DESCRIPTION:

AMOUNT:

\_\_\_\_\_  
PRINCIPAL OR RESPONSIBLE OFFICER

\*\*\*RECEIPT NOT VALID UNLESS SIGNED BY AN APPROPRIATE SCHOOL OFFICIAL\*\*\*  
\*\*\*CREDIT WILL BE ACKNOWLEDGED UPON VERIFICATION\*\*\*

ACCOUNT	ACCOUNT NAME	DESCRIPTION	AMOUNT/ ACCOUNT BALANCE