



EFTPOS Account Summary

FAX TO: 920 9802

Kindergarten Name	
For the period:	From: To:

Date	Code	Details of Purchases (No personal expenditure)	Cost of Purchase (Including GST)	Fundraising Expense?	Receipt Attached?
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
				YES/NO	YES/NO
		TOTAL	\$		
Head Teacher's Signature				Date Approved	
<p>By POST - original of form goes to Association with receipts attached. Please staple the receipts to A4 paper – several per page. This can be sent monthly – or more frequently if you require the account to be topped up. HT should keep a copy for her records.</p> <p>By FAX - You can copy the receipts and FAX this form and the page of receipts.</p>					