

## **Accounting and Cash Control Guidelines for Student Activity Funds**

### **BASIC REQUIREMENTS**

Student Accounts should not be used for any activities that do not relate to the conduct of student programs. No individual should realize a personal gain from funds raised to benefit students at Athens Area Schools.

Cash collected from students or fundraisers should be counted by two persons immediately after an event whenever possible (adults are ultimately responsible) and send to the business office for deposit (unless otherwise arranged). Cash over \$50 should normally not be held overnight.

Cash from different fundraisers or programs should not be co-mingled - identify them separately and send to the business office separately for deposit.

### **PURCHASING OPTIONS**

There are three options for payment of products/services for student activities with the first priority being the choice used most frequently and the third priority used less frequently.

#### **Priority 1 - Requisition/Purchase Order Process**

Routine purchases and other expenses should follow the traditional requisition process. Submit a requisition from the supplies, materials, and equipment to your supervisor for approval (unless purchase is an emergency). Please include the vendor name and address, cost of item, shipping, and account number (if known). The business office will process the requisition and provide payment when the product has been received.

#### **Priority 2 - Credit Card Purchases**

Credit cards may only be used for the purchase of the following types of goods/services for the district:

1. Transportation for authorized trips
2. Lodging and meals for authorized trips or meetings
3. Approved supplies (pre-approval is required unless it is an emergency)

All pertinent documentation (i.e. receipts/approved requisitions) must be attached to the credit card statement and submitted to the supervisor for final approval. Failure to have such demonstration may result in personal payment of bills.

The employee to whom a credit card is issued shall be responsible for its use and shall not allow the card to be used by anyone else or for any unauthorized purchases. Any unauthorized use shall subject the cardholder to penalties of the law and/or board policy.

NO personal expenses or cash advances are to be charged to the credit card. This includes alcohol, personal telephone calls, etc. In addition, spousal-related expenses are not to be charged to the credit card.

Maximum Monthly credit care limit is \$2,000.

### **Priority 3 - Checking Account**

Employees responsible for the checking account must maintain a set of records that clearly reports all accounting activity and submit to the business office each month. Payments from the checking account should not be authorized without sufficient documentation (receipts). The following will be required monthly:

1. Check stub clearly identifying the payee.
2. Sufficient documentation to substantiate the check.
3. Report that indicates that starting balance, checks written and ending balance.
4. After monthly reports are received and reconciled, the business office will replenish the checking out to the approved level.

The checking account is to be used only for local student activities (i.e. bowling, local restaurant expenses, and recreational outings) that do not accept purchase order to credit cards.

Fund Raiser Activity Request Form  
Internal Funds

Contact Name	Department
Type of Activity	Location of Activity
Date of Activity	Time of Activity

Description of Activity: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Goal of Activity: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Fund Advance Needed, if any                      \$ \_\_\_\_\_  
 Expected profit, if known                         \$ \_\_\_\_\_

List below the individuals working on the Activity:	
Name	Duty, as it relates to the Activity

<p>(TO BE COMPLETED BY SUPERVISOR)</p> <p style="text-align: center;">___ Approved      ___ Denied</p>	
<i>Supervisor's Signature</i>	<i>Date</i>

Fund Raiser Activity Summary Form  
Internal Funds

Contact Name	Department
Type of Activity	Date of Activity

**Gross Sales** (Money Taken In)    \$

\*Note: Sales tax must be collected on all sales and transmitted to the Department of Treasury.

**Total Deposit** (Money Sent to Business Office)    \$

**Difference**    \$

Explanation of any Variance: \_\_\_\_\_

\*Please submit a list of all unsold items.

Cost of Event – Expense Detail			
Date	Vendor	Description	Cost
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
<b>Total Expenses</b>			<b>\$</b>

Explain any vendor bonus programs (cash back for volume sales, free products etc.):

Prepared By: _____	Date _____
Supervisor's Signature _____	Date _____