

RECEIPT For School Fund Contribution

*Teacher's
Choice*

DEPARTMENT OF EDUCATION
OF THE CITY OF NEW YORK
DIVISION OF FINANCIAL OPERATIONS

School Year _____

Please print or type all information except signatures

PARTICIPANT INFORMATION	TEACHER'S NAME		FILE NUMBER
	LOCATION CODE	SCHOOL NUMBER AND NAME	\$ AMOUNT OF ALLOCATION
SCHOOL PRINCIPAL CERTIFICATION	I certify that _____, the above named teacher/participant, has made		
	a contribution in the amount of \$ _____ from his/her Teacher's Choice		
	allocation to the _____ school fund. This money will be put		
	towards the purchase of _____		
	_____ Principal/Designee Signature		_____ Date

RECEIPT For School Fund Contribution

*Teacher's
Choice*

DEPARTMENT OF EDUCATION
OF THE CITY OF NEW YORK
DIVISION OF FINANCIAL OPERATIONS

School Year _____

Please print or type all information except signatures

PARTICIPANT INFORMATION	TEACHER'S NAME		FILE NUMBER
	LOCATION CODE	SCHOOL NUMBER AND NAME	\$ AMOUNT OF ALLOCATION
SCHOOL PRINCIPAL CERTIFICATION	I certify that _____, the above named teacher/participant, has made		
	a contribution in the amount of \$ _____ from his/her Teacher's Choice		
	allocation to the _____ school fund. This money will be put		
	towards the purchase of _____		
	_____ Principal/Designee Signature		_____ Date