

# **West Islip Union Free School District**



## **Guide to Field Trips**

*Updated March 27, 2024*

**The processes and procedures in this guide should be adhered to for all field trips coordinated by District personnel.** The forms required for field trips are available on the District website at [www.wi.k12.ny.us/staff/staff\\_forms](http://www.wi.k12.ny.us/staff/staff_forms).

All field trip inquiries and submissions should be made to the Business Office to the attention of Kristi Macchione ([Kristi.Macchione@wi.k12.ny.us](mailto:Kristi.Macchione@wi.k12.ny.us) /631-930-1518).

### **Field Trip Request**

- At least 30 days prior to scheduling a field trip, email Danielle Ortiz ([d.ortiz@wi.k12.ny.us](mailto:d.ortiz@wi.k12.ny.us)) in the Transportation Office to check if buses are available for the preferred field trip date. Requests must be made via email. There is a cost associated with using a bus for a field trip. Current pricing is posted on the District website at the above link. Field trips taken between 9:30 AM and 1:30 PM from school to school within the district will incur no charge when using in-district buses (e.g. High School / Planetarium visits).
- After the field trip date is confirmed with Transportation—and prior to collecting money for a field trip—the building/department support staff must complete the Field Trip Request in **Trip Direct**. (See Exhibit A).
- Once the field trip is approved in Trip Direct by the building principal, determine if a Purchase Order for transportation costs is required. If a purchase order is required, it must be created at this time.
  - A Purchase Order is required if the trip is being funded (entirely or partially) by a district department budget
  - A Purchase Order is NOT required if a field trip is funded entirely by fees collected from students

If required, a Purchase Order must be created at this time - regardless of whether the exact cost of the trip is known at the time of booking. An estimate may be used for the Purchase Order and can be adjusted when the final invoice is received.

- All out of state and overnight trips require approval of the Superintendent and notification to the Board of Education.

### **Field Trip Fees**

- Fees must be collected from parents and received by the Business Office at least **two weeks** prior to requesting payment for a field trip. Fees can be collected from parents via the District's online payment system (MySchoolBucks) and/or by check (checks must be made payable to West Islip UFSD). Cash can be accepted only if necessary.
- To use the online payment system for fee collection, complete the MySchoolBucks Product Request form and submit it to the Business Office (See Exhibit B). A copy of the form from Trip Direct must be submitted to the Business Office with the MySchoolBucks Product Request form. MySchoolBucks charges a processing fee, so parents should also be offered the option to pay by check.

- A Deposit Form (**See Exhibit C**) must be completed any time monies are collected from students. This form must be completed in its entirety (e.g. name of preparer, field trip destination, signature). Checks and cash should be listed separately, and totaled at the bottom. Retain a copy of the Deposit Form for your records. If cash is collected, the use of a pre-numbered receipt book is required. These books are available in the main office of each building. (**See Exhibit D**)
- The Deposit Form, any cash collected, original checks, and a copy of the checks (fitting as many as possible on one copy) should be submitted to the Business Office using a tamper-evident deposit bag. Deposit bags are available in the main office of every school. On the outside of the bag list the name of the school building and the total amount of money included in the bag (note: more than one deposit can go in one bag) (**See Exhibit E**). The bag must be sealed, documented on the log sheet located in the main office and sent via interoffice mail to the Business Office (or kept in a safe until delivery arrangements are made). When the Business Office receives the deposit bag, the funds will be recounted and verified. The sender of the funds will receive a confirmation email from the Business Office stating the amount of funds that were received. The sender should compare this amount to the copy of the form that was sent to the Business Office to ensure accuracy.
- Monies collected should be submitted to the Business Office in a timely manner and should not be retained at the building level for an extended period of time. Any employee collecting monies should have documentation supporting the receipt of those monies. For field trips, a student listing is required and should document the amount and method of payment for each student in the class. Any students who are not attending the field trip should also be noted on this listing. It is recommended to create these lists electronically using Microsoft Excel/Google Sheets and saved for one year after the school year is complete. **It is the responsibility of the teacher to keep track of the students who paid by check/cash – the Business Office does not maintain these records.**
- If a tamper-evident bag is damaged or unable to be used, discard it and note “destroyed” on the log sheet. The main office should notify the Business Office of the discarded bag.
- As the trip fees are collected, the Business Office will periodically send you a list of who paid for the trip via MySchoolBucks.

### **Payment/Refund Request Form**

Complete a Payment/Refund Request form to request a check payable to the field trip vendor. Submit your request with a copy of the approved Field Trip Request form (from Trip Direct) at least **TWO WEEKS** prior to when you require the check. (**See Exhibit F**). **NOTE:** Checks are processed on Thursdays and released on Friday afternoons. Please plan accordingly.

- Specify on the Payment Request Form if a check must be hand delivered to the vendor on the day of the field trip. Contact the Business Office to confirm when the check can be picked up.
- Verify with your building/department office staff that the vendor is in nVision. If not, submit a new vendor form & completed W-9 from the vendor to the Business Office. (**See Exhibit G and H**)
- Be sure to include the **original invoice** and any other supporting documentation. Do not send photocopied invoices.

- **IF THE PAYMENT REQUEST IS SUBMITTED UNTIMELY, IT MAY NOT BE PROCESSED BEFORE YOUR TRIP DATE.**
- In the rare instance when a cash tip is needed (e.g. fishing trip, coach bus trip), a check is issued to the teacher. After the teacher cashes the check and gives out the appropriate tip, a **Field Trip Tip Certification** form must be filled out and submitted to the Business Office after the trip takes place.  
(See Exhibit I)

### **Trip Information**

- The Transportation Department sends a weekly email to the administrators and office staff, which includes a list of all pertinent field trip transportation information, including driver contact names and numbers. The person who scheduled the trip transportation request must verify that the trip information is accurate and included on the weekly email. This information should also be shared with the staff who are attending the field trip so they are aware of the bus and driver contact information.

### **Nursing Services**

- If any student on your field trip requires a school nurse to be in attendance, you must contact the school nurse's office to ensure availability for your preferred field trip date. Confirmation of school nurse availability should take place when transportation is confirmed.

## Exhibit A 1/4

### Trip Direct Quick Step Guide for Requesters

- 1) Open your Internet Browser (Internet Explorer, Firefox, etc). Type the following into the web address bar: [www.myschoolbuilding.com](http://www.myschoolbuilding.com). Enter the account number **22388015** then click on Submit Organization. Or you can use the following link to access the login page:

[http://www.myschoolbuilding.com/myschoolbuilding/myschedulenew\\_wiz1.asp?acctnum=22388015](http://www.myschoolbuilding.com/myschoolbuilding/myschedulenew_wiz1.asp?acctnum=22388015)

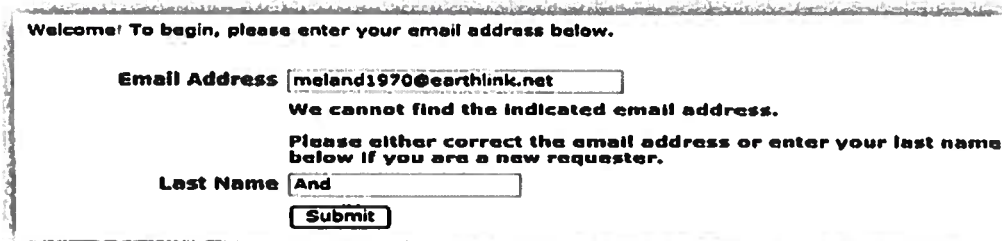
- If you have been to this website before and have entered a trip request into the system, you are already registered as a user. You just need to enter your email address at this time then proceed to step # 4.



Welcome! To begin, please enter your email address below.

Email Address

- 2) On the next screen, you will be prompted to enter your email address click submit, enter your last name then click submit again.



Welcome! To begin, please enter your email address below.

Email Address

We cannot find the indicated email address.  
Please either correct the email address or enter your last name below if you are a new requester.

Last Name

- 3) Enter your 1<sup>st</sup> name then click submit (phone number, pager, etc. are optional)

- **HELPFUL INFORMATION:** To create a shortcut to your desktop, find a blank area on this screen and right click on your mouse. Click on Create Shortcut. This will add an icon to your desktop. You can double click on this the next time you want to sign in.



First Name ☒

Last Name ☒

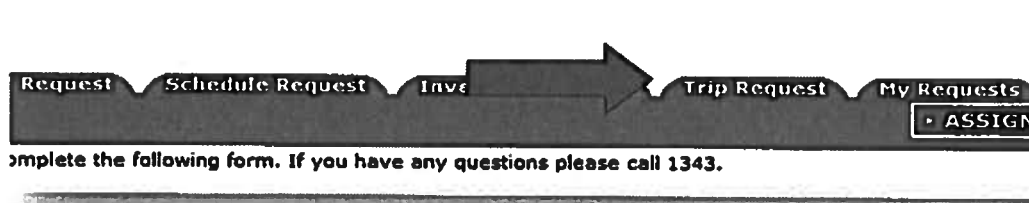
Email Address ☒

Phone Number

Cellular Phone

Pager

- 4) Click on Trip Request Tab to enter your request



Request Schedule Request Invoice Trip Request My Requests

ASSIGN

Complete the following form. If you have any questions please call 1343.

- 5) Fill out all boxes with a ☒ mark beside it.

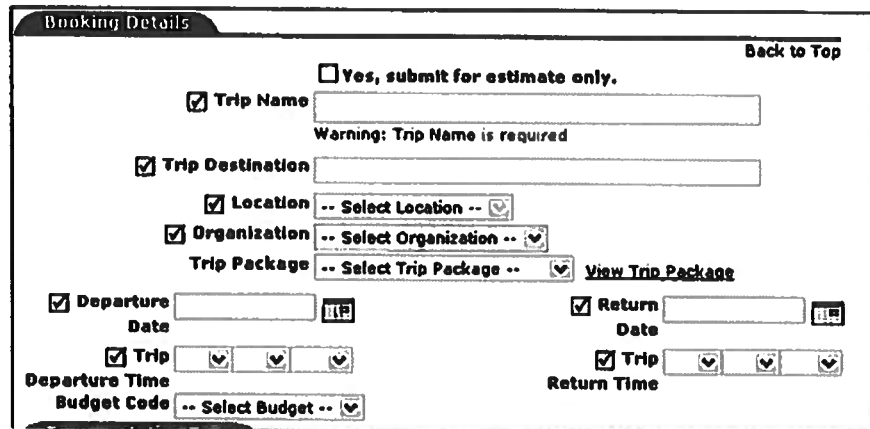
**Trip Name:** The name of the trip (*Football Game, State Capitol Trip*)

**Trip Destination:** The city/town of when you arrive at your final destination.

Fill in the departure and return dates and times.

**Budget Code:** (*if available*), fill in the appropriate budget code that the trip will be charged to.

*Check the box if you only want an estimate for the trip.*



Booking Details Back to Top

☐ Yes, submit for estimate only.

☒ Trip Name   
Warning: Trip Name is required

☒ Trip Destination

☒ Location -- Select Location --

☒ Organization -- Select Organization --

Trip Package -- Select Trip Package --  View Trip Package

☒ Departure Date

☒ Return Date

☒ Trip

Departure Time







Budget Code -- Select Budget --

☒ Trip

Return Time

- 6) Click on the type of transportation that you would like to use to arrive at the trip destination. Check the box to put your name as the trip contact

person or enter the appropriate information for another trip contact.

Transportation Type		
<input checked="" type="checkbox"/> Click on the transportation type below that best suits your needs:		
 Activity Bus	 Charter Bus	 Mini-Van
 School Bus	 Trip Support Vehicle	 Wheelchair Equipped Vehicle
<input checked="" type="radio"/> OK		
Trip Contact		
<input checked="" type="checkbox"/> Yes, the 'Booked By' requester information is the same as the 'Trip Contact' information.		
<input checked="" type="checkbox"/> First Name	<input checked="" type="checkbox"/> Last Name	<input checked="" type="checkbox"/> Email
Melinda	Administrator	melinda@dude.com

- 7) Enter any faculty or adults that will be supervising the trip. Also indicate the number of students attending the trip. Boxes without the check mark are optional. The submittal password for the trip request is tripdirect

Security	
<input checked="" type="checkbox"/> Password	Forgot Password?
<input type="text"/>	
<input type="button" value="Submit Request"/>	
To view uploaded consent form, Please click here.	

- 8) You can review any requests that you have entered into the system. Click on the My Requests Tab then My Trip Requests. You will be able to see when your request has been approved, declined, etc. You are also able to print out a listing of your requests by clicking on the print icon.

[My Maint Requests](#) | 
 [My IT Requests](#) | 
 [My Schedule Requests](#) | 
 [My Inventory Requests](#) | 
 [My Trip Requests](#)

## My Trip Requests

Note: Once the trip request is assigned to someone for approval, you no longer can edit the request. You can click on the current assigned person name to send email and request changes on your trip request.

Search for ' '

Search this results for:  [GO](#) [Show All](#)

[Print This!](#)

1 - 6 of total 14 listed

[First](#) | 
 [Previous](#) | 
 [Next](#) | 
 [Last](#)

Trip ID <input type="checkbox"/>	Status <input type="checkbox"/>	Trip State <input type="checkbox"/>	Trip <input type="checkbox"/>	Organization <input type="checkbox"/>	Total <input type="checkbox"/>
Trip Name <input type="checkbox"/>	Location <input type="checkbox"/>	# <input type="checkbox"/>	Destination <input type="checkbox"/>	Contact <input type="checkbox"/>	Costs <input type="checkbox"/>
Departure <input type="checkbox"/>	Return Date <input type="checkbox"/>	Students <input type="checkbox"/>	Package <input type="checkbox"/>	Name <input type="checkbox"/>	Total <input type="checkbox"/>
Date Time <input type="checkbox"/>	Time <input type="checkbox"/>	# Adults <input type="checkbox"/>	Name <input type="checkbox"/>	Contact Phone <input type="checkbox"/>	Estimated <input type="checkbox"/>
Pick Up <input type="checkbox"/>	Drop Off <input type="checkbox"/>	Attendees <input type="checkbox"/>	Educational <input type="checkbox"/>		Costs <input type="checkbox"/>
Location <input type="checkbox"/>	Location <input type="checkbox"/>	Objectives <input type="checkbox"/>			
152	Submitted	Inactive Park		Dude High PTA	\$0.00
9th Grade Trip	Dude High	20		Melinda	\$0.00
9/23/2008	School	0		Administrator	
12:00 PM	9/23/2008 7:00 PM	20			
151	Submitted	Inactive Zoo		AGHS Academic	\$0.00
SchoolDude	Dude High	20		Melinda	\$0.00
Trip	School	0		Administrator	
9/24/2008 5:00 AM	9/24/2008 8:00 AM	20			





**West Islip Union Free School District**  
MySchoolBucks Field Trip Request Form

This form must be provided to the Business Office (Attn: Kristi Macchione) at least 14 days before money collection for a field trip begins.

**This form must be submitted with:**

- 1. An approved field trip request (from Trip Direct)**
- 2. A copy of the field trip notice provided to parent/guardian**

**Sponsoring Teacher Name(s):** \_\_\_\_\_

☐ Mr.   ☐ Mrs.   ☐ Ms. (*Salutation is required for MySchoolBucks listing*)

**School:** \_\_\_\_\_ **Group/Grade:** \_\_\_\_\_

☐ Club   ☐ Class   ☐ School-Wide Function (check one)

**NOTE:** If this request is for a club, all funds collected through MySchoolBucks will be transferred to the District's Student Activities account where all disbursements will be made. As part of this process, you will need to fill out a Payment/Refund Request Form and send the completed form to the Business Office. Please call the Business Office with any questions about this process.

**Field Trip Information**

**Date of Field Trip:** \_\_\_\_\_ **Time of Field Trip:** \_\_\_\_\_

**Location of Field Trip:** \_\_\_\_\_

\_\_\_\_\_

**Cost Per Student of Field Trip:** \_\_\_\_\_

**Closing Date:** \_\_\_\_\_

*This is the date the field trip will be removed from MySchoolBucks. This date will determine when you receive your final master MySchoolBucks report, and must be at least 2 weeks before the field trip date.*

**Special Field Trip Instructions/Information (include any additional information that should appear for parents/guardians on MySchoolBucks):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**For Business Office Use Only**

n-Vision Acct #: \_\_\_\_\_

Product entered into MySchoolBucks: \_\_\_\_\_ / \_\_\_\_\_  
initials                      date

WEST ISLIP UFSD  
DEPOSIT FORM

Exhibit C

Purpose: \_\_\_\_\_

Teacher/Preparer: \_\_\_\_\_

Date(s): \_\_\_\_\_

1. Money collected from students should be in the form of a check and be payable to **West Islip UFSD**.
2. Checks must be organized and listed below in denomination order. The total quantity and amount of checks must be indicated in the space provided.
3. Make two photocopies of all checks being deposited, fitting as many checks per page as possible. Retain one copy for your records and attach the other copy.
4. Deposits should be sent to the Business Office prior to requesting field trip payments.
5. After the deposit has been received, you will be sent a verification email from District Office.

Denomination	Quantity		Total	
<b>TOTAL CHECKS</b>				
\$100.00				
\$50.00				
\$20.00				
\$10.00				
\$5.00				
\$1.00				
\$0.25				
\$0.10				
\$0.05				
\$0.01				
<b>TOTAL CASH</b>			\$	-

**TOTAL RECEIVED**

\_\_\_\_\_  
Teacher/Preparer - Signature/Date  
Deposit Prepared

\_\_\_\_\_  
Business Office - Signature/Date  
Deposit Verified

Exhibit D

INDIVIDUAL COPY

WEST ISLIP  
PUBLIC SCHOOLS  
WEST ISLIP, N.Y. 11795

GENERAL  
RECEIPT

30751

Received

DATE \_\_\_\_\_

FROM \_\_\_\_\_ \$ \_\_\_\_\_

ADDRESS \_\_\_\_\_ VILLAGE \_\_\_\_\_

Dollars

FOR \_\_\_\_\_

(INDICATE ON THIS LINE THE ACTIVITY CHECKED ON THE COVER OF THIS BOOK)

SCHOOL \_\_\_\_\_ SIGNED \_\_\_\_\_

SCHOOL OFFICIAL

☐ CHECK # \_\_\_\_\_ ☐ CASH

FIRST COPY—To Individual  
FORM WI/GR-993

SECOND COPY—To Treasurer

THIRD COPY—Stays in Book

30751-30775

JD business forms co. • (516) 544-0916

Exhibit E

## CAUTION!

IF THE SECURITY SEAL CLOSURE IS TORN, DISTORTED OR DISPLAYS:  
A "VOID" MESSAGE OR SMEARED OR MISSING STARS  
DO NOT OPEN - NOTIFY SENDER IMMEDIATELY

STEP 1. USING A BALLPOINT PEN, FILL OUT REQUIRED INFORMATION IN GRAY SHADED BOX. INSERT DEPOSIT INTO BAG.  
STEP 2. RELEASE TRAPPED AIR. REMOVE PAPER RECEIPT FROM BACK OF SECURITY SEAL TO EXPOSE ADHESIVE. KEEP PAPER RECEIPT WITH COPY OF DEPOSIT SLIP.  
STEP 3. PRESS FIRMLY ON ENTIRE LENGTH OF SEALED IMPROPERLY. DO NOT ATTEMPT TO RESEAL BAG.

NOTE: "FROM" Information MUST be filled in

FROM: Teacher Name  
High School

To: Eva Gonzalez  
District Office

SAID TO CONTAIN:

Cash Amount \$: 200

Check Amount \$: 100

Other Amount \$: 0

TOTAL AMOUNT \$: 300

Prepared By: Teacher Name

Account/Store#: X Date: 6/5/14

Authorized Signature: Teacher Signature

SAMPLE

M204419875



DO NOT CUT HERE TO OPEN

DO NOT CUT HERE TO OPEN

# Exhibit F

## PAYMENT/REFUND REQUEST

WEST ISLIP SCHOOL DISTRICT  
100 Sherman Avenue  
West Islip, NY 11795  
Phone 631-930-1531

**SAMPLE**

TO BE USED FOR PAYMENT REQUESTS NOT ASSOCIATED WITH A PURCHASE ORDER (Payments from Trust and Agency and refunds)

**VENDOR NAME:**  
(Individual seeking refund or  
vendor being paid)

**STREET ADDRESS:**

**CITY, ST ZIP CODE:**

**PHONE NUMBER:**

**VENDOR NUMBER:**

### VENDOR INFORMATION

American Museum of Natural History

79th Street

New York, NY 10024

212-769-5200

4632

### PAYMENT/REFUNDS (circle accordingly)

Program	Field Trip	Library Book	Textbook	Tuition	Other
---------	------------	--------------	----------	---------	-------

PAYMENT DUE DATE	REASON FOR PAYMENT	TOTAL
6/5/19	Trip Direct # 1900 150 people @ \$20 each (See attached invoice & roster)	\$3,000

**Teacher name**

Payment Requestor

Date

**Principal name**

Building Principal/Director

### Business Office Use Only

Budget Code Credited	
Budget Code to Debit	

Assistant Superintendent

Date

### Guidelines

- Requests for a payment or refund must be accompanied by proof of deposit. Acceptable forms of proof include: copy of check, cash receipt or account transaction report from Finance Manager.
- Payment requests for field trips must also be accompanied by an original invoice and must not exceed the amount previously deposited. All funds collected for a field trip must be expensed
- The New Vendor Request Form must be attached for new vendors.
- If a vendor requires an Exempt Certificate as evidence of our tax exempt status, contact the Business Office.
- Forward completed form to Accounts Payable. Allow two weeks for processing prior to the date that the check is required. Unless otherwise directed, checks being issued for field trips must be picked up at the Business Office.
- All original receipts or invoices obtained the day of your field trip must be immediately forwarded to Accounts Payable upon your return to school.

Exhibit G

## West Islip UFSD New Vendor Request Form

Date : \_\_\_\_\_

To: Rob Nocella, Purchasing Agent

[r.nocella@wi.k12.ny.us](mailto:r.nocella@wi.k12.ny.us)

Fax: 631-893-3217

From: \_\_\_\_\_

Phone: \_\_\_\_\_

Please add the following vendor to nVision:

Vendor Name: \_\_\_\_\_

Purchasing Address: \_\_\_\_\_

\_\_\_\_\_

Payment Address: \_\_\_\_\_  
(if different)

\_\_\_\_\_

Vendor Phone: \_\_\_\_\_

Vendor Fax: \_\_\_\_\_

Vendor Email: \_\_\_\_\_

Vendor Tax ID #: \_\_\_\_\_

*(requires W-9 Tax ID Form to be completed)*

Contact Person: \_\_\_\_\_



Exhibit H

# Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3).
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> <input type="checkbox"/> Other (see instructions) ▶	Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code		
7 List account number(s) here (optional)		

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
			-				-		
or									
Employer identification number									
			-						

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of U.S. person ▶

Date ▶

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

# Exhibit I

## West Islip UFSD Field Trip - Tip Certification

Trip: \_\_\_\_\_

Date: \_\_\_\_\_

Teacher: \_\_\_\_\_

School: \_\_\_\_\_

Tips were given to:

Position	Name	Amount

Total Amount of Tips: \_\_\_\_\_

Teacher Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_