ABRAHAM BALDWIN AGRICULTURAL COLLEGE
DAILY REVENUE REPORT

Date: _____ Report No: _____

To: _____ Business Office Receipt No: _____

From: _____

Report Type: _____

Account: _____

NO.	Name	Receipt No.	Tenure Type (cash, check, etc)	Amount
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
			Total Amount	

I affirm that the information on this report is correct.

_____

Signature of Preparer Date

_____

Received by Date

Revenue Report Breakdown	
Total Cash	
Total Checks	
Total Credit Cards	
Total Revenue	

Revised 05/18/2006