

8100 Reconciliation

Date: _____

Month: _____

School: _____

Amount Owed

8100 Report Balance - Rpt Date _____

8100 Remittance (Include only checks reimbursing district for 8100 activity)

Date	Check NO.	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
		Less Total Remittance

		Adjusted 8100 Balance **
		=====

8100 Items not Paid

Date	Reference	Comment	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
			Total Items not Paid **
			=====

- Note: (1) ** Adjusted 8100 balance and Total Items not Paid must agree**
(2) Due before the last day of the month
(3) Send 1 copy to Carol Winters - District Office
(4) Unresolved items must be cleared in 90 days