

# Chippewa Valley Schools Payment Collection Form

This payment collection form is District Policy and should be filled out for any type of payment collection, fundraiser or raffle that takes place on behalf of all schools, sports teams, student clubs, parent groups, teachers, coaches, sponsors and students. For the high schools, this form must be submitted to the appropriate Student Activities Director before providing it to the Building Administrator/Athletic Director for final approval. The Student Activities Director's signature on this form confirms the information has been reviewed and preliminarily approved. Submission of this form is required prior to the start of the collection/event and must include a copy of the flyer, donation letter or any other communication that will be shared with staff, students or community members. Approval of this payment collection, fundraiser or raffle is at the discretion of the Building Administrator/Athletic Director. Failure to adhere to Chippewa Valley Schools Fundraising or Payment Collection Policies may be subject to disciplinary action. A separate form should be submitted for each payment collection, fundraiser or raffle you are holding.

**I understand that the District expectation is for me to collect my payment using one of the electronic payment systems supported by the District and I will ask for approval from the Business Office if not using one of these approved systems.**

Name of Activity: \_\_\_\_\_

Collection Start: \_\_\_\_\_

Activity held at: \_\_\_\_\_

Collection End: \_\_\_\_\_

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

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

Name of Club/Group: \_\_\_\_\_

Internal Account: \_\_\_\_\_

Sponsor/Coach/Teacher Name: \_\_\_\_\_

Actual Event Date: \_\_\_\_\_

Sponsor/Coach/Teacher Signature: \_\_\_\_\_

If your activity is (or includes) a raffle, you must secure a Raffle License. Are you securing a raffle license? Yes  No

Is there an entrance/participation fee? Yes  No  If yes, what is the participation amount? \$ \_\_\_\_\_

Description of Payment Collection/Fundraiser: \_\_\_\_\_

Purpose/Goal of this Payment Collection/Fundraiser: \_\_\_\_\_

*Please use this section to estimate what you will be collecting and what your expenses are. Example: You hope to sell 100 t-shirts at \$15 per shirt, with a cost of \$10 per shirt. Your Estimated Revenue would state \$15 x 100 shirts with an extended amount of \$1500. Your Estimated Expenses would state \$10 x 100 shirts with an extended cost of \$1000. Your Net Income would be the difference of \$500.*

### Estimated Revenue

List what you are charging for your items - calculate per person if applicable

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**Total Estimated Revenue** \$ \_\_\_\_\_

### Estimated Expenses

List what the cost is for your items - calculate per person if applicable

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**Total Estimated Expenses** \$ \_\_\_\_\_

**Total Estimated Net Income** \$ \_\_\_\_\_

(Total Estimated Revenue - Total Estimated Expenses)

### Which electronic payment system are you using?

**PaySchools Central** requires a parent account and students must be linked with the account. Payments can be assigned and stay with the student until paid. Please fill in the PaySchools Central Fee information on the second page and submit this entire approved document to the Bookkeeper/Secretary for PaySchools Central Fee Setup. If assigning the fee, include a student list with your request.

**PaySchools Events** can be open to the general public for purchases or monetary donations. Please submit an approved copy of this form and a PaySchools New Events Setup form to Charlene Staniec in the Business Office. You will need to update the flyer, donation letter or community communication with the web link provided once the event is setup. **Click this hyperlink to the form**

**Square** for in person payments requires prior approval and setup by the Business Office. I have contacted Charlene Staniec via email for approval to use and \_\_\_\_\_

I am using a vendor/company that is collecting payment for me via their website. Please submit this approved form and email a website link for your Payment Collection/Fundraiser to Charlene Staniec in the Business Office.

I am not using electronic payment and I have approval via email from Charlene Staniec in the Business Office. \_\_\_\_\_

### Approval Section

Approved

Not Approved

High School Student Activities Director Signature (if applicable): \_\_\_\_\_

Building Administrator or Athletic Director Signature: \_\_\_\_\_

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

**Once approved please distribute: Original form to District Auditor, 1 Copy to Bookkeeper/School Secretary and 1 copy for teacher/coach/sponsor records.**

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## PaySchools Central Fee Setup Information

Will this fee be assigned to the student? Yes No **If yes, you must provide a list of students for assigning.**

PaySchools Fee Name: \_\_\_\_\_

Fee Description:  
(Parents can view this) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PaySchools Fee Amount: \_\_\_\_\_

**Did you remember to account for the 3.5% PaySchools fee?**

Does this fee qualify for Free/Reduced Lunch Discount? Yes No

Reduced Lunch Fee Amount: \_\_\_\_\_

Select the grade(s) or sport level for your fee setup:

Free Lunch Fee Amount: \_\_\_\_\_

Elementary School: K 1 2 3 4 5

PaySchools Start Date: \_\_\_\_\_

Middle School: 6 7 8

PaySchools End Date: \_\_\_\_\_

High School: 9 10 11 12

ASN: \_\_\_\_\_

Fee Category: \_\_\_\_\_  
Bookkeeper/Secretary Use

Fee Type: \_\_\_\_\_  
Bookkeeper/Secretary Use

Bookkeeper/Secretary Notes:

Please use this format when naming your fees: **2023/2024 SCH 3rd Grade Westview Orchard Field Trip**

*School Year in this format: 2023/2024*

*Three or four character school indicator for your school: SCH*

*If applicable, school club, school class or grade level: 3rd Grade*

*Fee Name: Westview Orchard Field Trip*

*Student and Chaperone fees for field trips should be two separate fees*