



BAYPOINT PREPARATORY ACADEMY PAC FINANCIAL POLICY AND PROCEDURES

All Parent Advisory Committee (PAC) funds are intended to benefit the students through the enhancement of the School's educational programs and activities. The PAC accounts are subject to BPA Financial Policies.

1. COLLECTION OF FUNDS:

The PAC must designate specific individuals to collect and manage all funds related to PAC events and activities. These individuals must adhere to the following procedures.

- All funds received in cash must be counted by two people, with one of the two being a PAC member and a BPA employee.
- Please separate currency by denomination and fill in amounts on Deposit Voucher (DV) (Attachment 2).
- Please log the number of checks and total value on the DV.
- The DV must be signed by those counting and the money given to the Site Administrator or Executive Director within 24 hours.
- Upon completion of the deposit, the Business Manager will notify the PAC of the funds deposited in the PAC account.

2. SOLICITING/RECEIVING DONATIONS:

Should the PAC decide to solicit donations in the community, the following procedures must be followed.. As BPA is a Federally tax-exempt 501(c)(3) organization, the PAC has certain responsibilities to donors.

- Prior to requesting a donation, please contact the Executive Director for approval.
- Donation requests must be submitted to individuals/companies on School letterhead.
- Submit all money donations to the Site Administrator or Executive Director.
- Report any donations received to the Executive Director in a prompt manner.
- Individuals/Companies requesting proof of a donation will be provided with BPA's IRS tax exempt "determination letter." Contact the Business Manager with this request.
- The PAC is responsible for maintaining a list of donations received. as well as sending thank you notes to all donors.

3. PURCHASE REQUESTS/REIMBURSEMENTS

- Prior to purchasing any items, a Purchase Request Form (Attachment 1) must be submitted to the Executive Director for approval.
- Upon approval, items will be processed and purchased by the Business Manager utilizing the School credit card.
- If the purchase cannot be done via the above process, individuals who make the purchase will be reimbursed.
- Reimbursements require a receipt and a completed Reimbursement Form (Attachment 3) must be submitted to the Business Manager upon purchase or, at the latest, within 2 weeks of the event.
- Reimbursements can take up to two weeks. If time sensitive, please contact the Business Manager.

Make checks payable to: BAYPOINT PREPARATORY ACADEMY



(Attachment 1)

**BAYPOINT PREPARATORY ACADEMY
PURCHASE REQUEST FORM**

Person Requesting:

Date of Request:

Class Requested For (if applicable):

Approved By: _____

Vendor for Purchase:

(If needed, attach screenshot of desired purchase)

Item Description	Why is the item needed? (i.e. To be used to support O.T.)	Quantity	Cost
Estimated Tax			
Shipping			
TOTAL			



(Attachment 2)

BAYPOINT PREPARATORY ACADEMY DEPOSIT VOUCHER

FUNDRAISER/ACTIVITY: _____

DATE: _____

PERSONS COUNTING MONEY: _____

(at least TWO PEOPLE are required to count when cash is included)

Please complete the following information, using **TOTAL AMOUNTS IN ALL AREAS**.

_____ x \$50.00 = \$ _____

_____ x \$20.00 = \$ _____

_____ x \$10.00 = \$ _____

_____ x \$5.00 = \$ _____

_____ x \$2.00 = \$ _____

_____ x \$1.00 = \$ _____

Total All Coins* = \$ _____

Total All Checks (# of checks _____) = \$ _____

SHORT / BALANCED / OVER (circle one)

Amount (if short/over): \$ _____

Date Verified: _____ Date Deposited: _____

Notes/Remarks _____

Submitted for Board Approval 12.13.22

TOTAL ALL COINS		
_____ Dollars	x	1.00 = \$ _____
_____ Halves	x	0.50 = \$ _____
_____ Quarters	x	0.25 = \$ _____
_____ Dimes	x	0.10 = \$ _____
_____ Nickels	x	0.05 = \$ _____
_____ Pennies	x	0.01 = \$ _____
*TOTAL ALL COINS		\$ _____



(Attachment 3)

**BAYPOINT PREPARATORY ACADEMY
REIMBURSEMENT FORM**

Person Requesting: _____

Mailing Address: _____

Date of Request: _____

Signature of Person Requesting Reimbursement: _____

I hereby certify that the above is an accurate accounting of my expenses incurred on behalf of Baypoint Preparatory Academy and I have attached copies of receipts and/or proof of payment.

Signature of Person Approving Reimbursement: _____

Item Description	Why is the item needed? (i.e. To be used to support O.T.)	Quantity	Cost
Estimated Tax			
Shipping			
TOTAL REIMBURSEMENT			