



TEXTBOOK CASH TRANSMITTAL REPORT AND BUYER QUOTATION WORKSHEET

SCHOOL NAME	LOCATION NUMBER
PREPARER'S NAME (Please print)	TELEPHONE NUMBER
SIGNATURE OF PRINCIPAL (or designee)	DATE

NOTE TO SCHOOLS:

1. Make checks payable to: School Board of Miami-Dade County, Florida
2. Send checks via school mail to: OFFICE OF TREASURY MANAGEMENT, SBAB - 9999 Room 615
Attention: Treasurer

Attached is check number: _____ in the amount of \$ _____

Please credit to the following revenue account:

DR/CR	CR. AMOUNT	OBJECT	SCHOOL LOCATION	PROGRAM	FUNCTION	DESCRIPTION
CR		449800		85600000	400000	Proceeds From Sales of Obsolete Instructional Materials
CR		449800		85600000	400000	Proceeds From Collection of Lost & Damaged Instructional Materials

TEXTBOOK BUYER QUOTATION WORKSHEET

COMPANY NAME	TELEPHONE NO.	CONTACT PERSON	TOTAL NO. OF ITEMS PURCHASED	TOTAL PURCHASE PRICE	NO RESPONSE/NO QUOTATION OFFERED*

*No response or no quotation offered, count toward the contract requirement.

Schools must send copies of this Cash Transmittal Report to Instructional Materials, mail code #9629 – Room 337. PLEASE DO NOT SEND CHECKS to Instructional Materials Department.