Prescribed by State Board of Accounts

REPORT OF COLLECTIONS

General Form No. 362 (Rev. 1989)

To: _____
(Title of Officer)

_____ (Governmental Unit) _____ (County), Indiana.

Collections for Period _____, 19____ to _____, 19____

DESCRIPTION	Fund to be Credited	Collections This Period	Prior Collections	Year to Date Collections
TOTAL AMOUNT COLLECTED				

I hereby certify that the foregoing is a true and correct report of collections due the above named governmental unit for the period shown.

Dated this _____ day of _____, 19____

NOTE
This is not to be used as a receipt for collections. The official to whom the report is made must issue an official receipt for the collections remitted.

_____
(Signature)

_____
(Title of Officer)