CHAMPLAIN COMMUNITY SERVICES
ACCOUNT LEDGER/PERSONAL

Individual_____ Month/Year:_____

Home Provider Signature _____

EXAMPLES OF:

DEPOSITS
Personal Spending Checks
Paychecks
Tax Refunds
Gifts
From savings account
From checking account

WITHDRAWLS
To checking account (attach deposit receipt)
To savings account (attach deposit receipt)
To Pocket (5.00 or less – receipts recommended)
Purchases (attach receipts)

Date	Description of Transaction	Deposit	Withdrawal	Balance

Date	Description of Transaction	Deposit	Withdrawal	Balance

Signature of Person Reviewing Form

Printed name of Person Reviewing Form

Title

Date