

FORM 2
CASH RECEIPTS AND DISBURSEMENTS RECORD

Case No. _____
 Case Name: _____
 Taxpayer ID #: _____
 For Period Ending: _____

Trustee Name: _____
 Bank Name: _____
 Initial CD #: _____
 Blanket bond (per case limit): _____
 Separate bond (if applicable): _____

1	2	3	4		5	6	7
Transaction Date	Check or Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran. Code	Deposit \$	Disbursement \$	Certificate of Deposit Balance

COLUMN TOTALS

Less: Bank transfers/CDs _____
 Subtotal _____
 Less: Payments to debtors _____
 Net _____

	NET	ACCOUNT
TOTAL - A NET DEPOSITS	DISBURSEMENTS	BALANCES
Checking # _____		
Savings # _____		
CD # _____		
(Excludes account transfers)	(Excludes payments to debtors)	Total Funds on Hand