# SCHOOL BOARD OF BROWARD COUNTY, FL INTERNAL FUNDS ACCOUNTING

# STANDARD PRACTICE BULLETIN

I - 204

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#### **TRUSTS**

# TOPICS IN BULLETIN:

- COLLECTIONS MADE FOR SCHOOL BOARD REMITTANCE I.
- II. COLLECTIONS OR DONATIONS MADE FOR SPECIFIC **PURPOSES**
- SCHOOL IMPROVEMENTS III.

### EXHIBIT REFERENCED:

Remittance Transmittal Form (See Treasurer's Office website for most current transmittal form at:

http://www.broward.k12.fl.us/comptroller/cfo/treasurer/treasurer\_doclinks.htm

Trust Fund Accounts are monies received or collected for specific, restricted purposes such as:

#### I. COLLECTIONS MADE FOR SCHOOL BOARD REMITTANCE

- Lost and Damaged Textbooks o
- Facility Rentals O
- Child Care Collections (Before/After Care)\* O
- Preschool Child Care Collections 0
- Damaged Property o
- Community/Vocational Tuition/Registration Fees\* o
- Sales Tax o
- Due to District (1142 expenses) <sup>@</sup> O
- With the exception of Lost and Damaged Textbooks, monies collected for A. remittance to the School Board of Broward County should be remitted on a monthly basis or in the case of Child Care collections according to the established remittance calendar.
- B. Monies transferred, from an Athletics, Band, Class, Club or Department account, to the "Due To District" account must be remitted to the School Board once amounts noted on the KSB1 report have been reviewed and verified. Balances noted on the KSB1 report, MUST be remitted on a monthly basis.
- C. The Due to District and Facility Rental accounts should be zeroed out at year end **or** an approved and documented reason for the balance MUST be retained for audit purposes.

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# I. COLLECTIONS MADE FOR SCHOOL BOARD REMITTANCE (continued)

\*Collection procedures for Child Care monies is covered in SPB A-454, and for Community/Vocational Fee collections see SPB A-421.

@See BPB A-510 for Remittance procedures of outstanding balances noted in prior years.

ALL MONIES TRANSMITTED TO THE SCHOOL BOARD OF BROWARD COUNTY MUST be transmitted with a completed Remittance Transmittal form.

# II. COLLECTIONS OR DONATIONS MADE FOR SPECIFIC PURPOSES

- o Scholarships
- o Specific Field Trip Collections
- o Book Clubs
- o Community School Supply Accounts
- A. With the exception of the following fund accounts, trust fund accounts are **not** to be operated in the **negative**. Exceptions are:

Internal Advance

- \*NSF Checks/Charges
- \*Over/Under

Reimbursable-Outside Agency

SBBC Reimbursable

These accounts, however, must be zeroed out at year end or an approved and documented reason for a negative balance **MUST** be retained for audit.

\*NOTE: It is understood the NSF Checks/Charges and/or Over/Under Accounts MAY have negative balances at year end. However, the negative balance should ONLY reflect transactions that occur on the year end bank statement.

B. Donations are to be documented with a letter from the donor listing the specific purpose of the donation.

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### III. SCHOOL IMPROVEMENTS

When it is desired to make school improvements, the funds are to be transferred from the **GENERAL FUND** to the School Improvements Trust Fund (account number available from Internal Accounts Instructor's office.) The following are guidelines for expenditures from this account:

- A. **ALL** school improvements must adhere to the purchasing requirements of School Board Policy 3320.
- B. Any installation of new or replacement equipment which becomes a part of, or is affixed to school buildings (which must comply with fire and building codes) must be reviewed and approved by the Director of School Facilities. Examples of the improvements would be:
  - o Air Conditioning
  - o Remodeling
  - o Stage/Blackout Curtain
  - o Electric Kilns
  - o Playground Shelters/Equipment
  - o Items requiring electrical and/or plumbing connections

# School Board of Broward County, Florida TREASURER'S OFFICE REMITTANCE TRANSMITTAL

School/Department Name		Cost Center (10)	Bus Area (4)	For the month ending				
			G/L			Functional		
Description		Fund (4)	Account (8)	WBS Element	Grant	Area (16)	Internal Order	Amount
Facilities Rental - Other (including Custodial	Salaries)	1000	4 3425 100					
Facilities Rental - Utilities	Jane,	1000	4 3425 101					
Facilities Rental - Lockhart Stadium		1000	4 3425 200					
Payments on School Internal Accounts	Check #	*Note: Attach a co	py of KSB1 Re	eport for Fund 8920				
Internal Accts - Other		8920	4 3495 600			11420000000000000		
Internal Accts - Salary		8920	4 3495 601			11420000000000000		
Internal Accts - Fringe Benefits		8920	4 3495 602			11420000000000000		
Internal Accts - Athletics		8920	4 3495 650			11420000000000000		
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			<u> </u>				<b>——</b>	
Premium Revenues (Health Occupational Ins		7120	4 3484 101					·
Sales and Use tax (enter total from workshee	et)	1000	2 2260 100					<del></del>
Student Testing Fees - Other Than GED Pre-School Projects VPK Regular School Y	·	1000 1000	4 3469 200 4 3372 100					
Pre-School Projects VPK Regular School Y Pre-School Projects VPK <b>Summer School</b>		1000 1040	4 3372 100					·
After Care Operational Fees		1040	4 3372 100					-
Commercial Food Program	'	1000	4 3473 106	-				, <del> </del>
Vending Machine		4990	4 3490 300	<del>                                     </del>				
Vending Machine Unofficial Telephone Calls		4990 1000	4 3490 835					,
Dual Enrollment		1000	4 3490 800					,
BECON - Dubbing		1020	4 3490 842	1				<del></del>
BECON - Print Graphics		1020	4 3490 843					
BECON - 1 filt Graphics BECON - School Services/Installation		1020	4 3490 845					
BECON - Production		1020	4 3490 846					
BECON - School Services/Repairs		1020	4 3490 848					
Industrial Training		1000	4 3495 101					
Sales & Services Fees		1000	4 3495 102					
Student Activity Fees		1000	4 3495 105					
Lost & Damaged Textbooks		1000	4 3498 100					
Type in Description of Miscellaneous Rev	venue*	Click on Cell & Select Fund (pop-up arrow will display)					Click on Cell & Select Internal Order if Applicable (pop-up arrow will display)	
Gifts,Grants,Bequests	· <del></del>	, i	4 3440 100				/	
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*		<u></u>	4 3490 840					
**For Treasury Use Only**  Clearing Account 5000 1 1111 105  Total \$0.0								\$0.00
Report Prepared By (Print Name):		Signature:	Signature:		Telephone:	Check box that applies (may select more than one box):		
Approved By (Print Name):		<u>Signature:</u>		Date:		☐ Check ☐ C	Cash	oney Order