

# DAYCARE FEES LEDGER

Comprehensive Childcare Financial Tracking

MONTH/YEAR: \_\_\_\_\_

FACILITY ID: \_\_\_\_\_

ACCOUNTANT: \_\_\_\_\_

DATE	CHILD/PARENT NAME	FEE DESCRIPTION	AMOUNT DUE	AMOUNT PAID	BALANCE	PAYMENT METHOD
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DATE	CHILD/PARENT NAME	FEE DESCRIPTION	AMOUNT DUE	AMOUNT PAID	BALANCE	PAYMENT METHOD
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**ADMINISTRATIVE NOTES:**

Total Fees Billed \$ \_\_\_\_\_

Total Payments Received \$ \_\_\_\_\_

Late Fees Applied \$ \_\_\_\_\_

**OUTSTANDING BALANCE** \$ \_\_\_\_\_

Verified By: \_\_\_\_\_ Date Signed: \_\_\_\_/\_\_\_\_/20\_\_\_\_ Page \_\_\_\_ of \_\_\_\_