



# Telephone Toll Record

Office of the Deputy Superintendent for Information and Organizational Systems  
MONTGOMERY COUNTY PUBLIC SCHOOLS  
Rockville, Maryland 20850

**INSTRUCTIONS:** In accordance with Regulation EGD-RA: *Telephone Services and Costs*, **list personal or unidentified toll calls** from the telephone bill and record appropriate information below.

Forward a copy of this completed form and any funds received for personal toll calls to the Division of Controller, CESC, Room 154 within ten working days of receiving the telephone bill. **Do not send cash through the pony.**

**Retain one copy of this form and the telephone bills for two years for auditing purposes.**

School/Department \_\_\_\_\_ Location Code \_\_\_\_\_

Billing Period: From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

### PERSONAL TOLL CALLS

Date	Place Called	Number	Person Calling	Cost

Total of personal calls\*

### UNIDENTIFIED TOLL CALLS

Date	Place Called	Number	Cost	Credit Obtained?

Total credit expected

I hereby certify that the information above is correct to the best of my knowledge. Further, the funds for "personal" calls as shown above\*, were forwarded to the Division of Controller in the amount of \$ \_\_\_\_\_.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature, Principal/Department Director

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date