Section 1: Department Informa	ation	
Date: Time:	Cash Box:	
Counted by:	Verified by:	
Section 2: Count Details		
Cash Count		Amount
Currency: BILLS	100s	
	50s	
	20s	
	10s	
	5s	
	2s	
	1s	
	SUBTOTAL	
Currency: COINS	Dollars	
	Half Dollars	
	Quarters	
	Dimes	
	Nickels	
	Pennies	
	SUBTOTAL	
	Total Currency (Bills and Coins)	
Total Checks for D	Deposit (adding machine tape attached)	
Less Sta	arting Change Fund (enter as negative)	
	TOTAL DEPOSIT	
Sales as Indicated per Receipts or Cash Register Tape		
Less Voided Transactions and/o	or Adjustments (Proper Approval Required)	
	TOTAL SALES	
Note: If Deposit>Sales = Cash Over; if Deposit <sales< td=""><td>=Cash Short Cash Over/Short</td><td></td></sales<>	=Cash Short Cash Over/Short	
Receipt Number or Transaction Number Reconciliation If previous day ending and current day beginning are not consecutive, explain on backside of form.	Previous Business Day Ending Number	
	Current Business Day Beginning Number	
	Current Business Day Ending Number	
	Next Business Day Beginning Number	
Section 3: Certification		
Counted by Signature Date	Verified by Signature	 Date