Name of School:		
Name of Club:		
	ASB Cash Count	
	Fiscal Year:	_
of person completing form:		

Name

Note

missing.

Date completing this form:_

(A) Denominations		(B) Number of Bills or Coins	(C) Total Amount Collected (A times B)			
Pennies	.01					
Nickels	.05					
Dimes	.10					
Quarters	.25					
Half dollars	.50					
Dollar coins	1.00					
Dollar bills	1.00					
Five dollar bills	5.00				Totals from	
Ten dollar bills	10.00				Receipts	
Twenty dollar bills	20.00				Adding Machine Tape	
		Total amount of all cash	\$	(D)	\$	Total Cash Receipts
		Total amount of all checks	\$	(E)	\$	Total Check Receipts
		Total amount of all cash and checks	\$			
	•	Total net amount of all cash and checks	\$			

ASB Bookkeeper

Initial

Initial

Initial

Initial

Confirm that total "cash & coin" receipts equal total amount of all cash. (D) Confirm that all check receipts agree to attached receipts. (E) Confirm that all check payees individually agree to attached receipts.

Confirm that all receipt numbers are sequential, with none

Follow up on ANY differences.

Completed tally sheet/sheets

Cash Count form prepared by:	<u> </u>
	Signature, Title and Date
Signature of fundraising staff counting the cash:	
· · · · · · · · · · · · · · · · · · ·	Signature and Date
Signature of fundraising staff counting the cash:	
	Signature and Date
Verified by ASB Bookkeeper:	
vermed by Neb Bookkeeper.	Signature, Title and Date
Submitted and Approved by	
Submitted and Approved by:	
Student Club Benrecentative:	
Student Club Representative:	Signature, Title and Date
	•
Principal/School Administrator:	
	Signature, Title and Date
Recorded in ASB Student Council Minutes on:	
	Date
Supporting documentation:	
(One or all must be included when this form is turned in)	
Cash register:	
Report of Ticket Sales form	
Unused tickets returned	
Prenumbered receipt books:	
Cash register tape	
Copy of each receipt issued	
Tally Sheet:	
Copy of each receipt issued	
All receipt books returned	
All receipt books accounted for	