ASB Cash Count

Name of School:

Name of Club:

ASB Cash Count

Fiscal Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person completing form:

Date completing this form:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. (A)  Denominations | | 1. (B)  Number of Bills or Coins | 1. (C) Total Amount  Collected (A times B) |  | 1. Totals from Receipts Adding Machine Tape |  |
| 1. Pennies | 1. .01 |  |  |
| 1. Nickels | 1. .05 |  |  |
| 1. Dimes | 1. .10 |  |  |
| 1. Quarters | 1. .25 |  |  |
| 1. Half dollars | 1. .50 |  |  |
| 1. Dollar coins | 1. 1.00 |  |  |
| 1. Dollar bills | 1. 1.00 |  |  |
| 1. Five dollar bills | 1. 5.00 |  |  |
| 1. Ten dollar bills | 1. 10.00 |  |  |
| 1. Twenty dollar bills | 1. 20.00 |  |  |
|  |  | 1. Total amount of all cash | 1. $ | 1. (D) | 1. $ | 1. Total Cash Receipts |
|  |  | 1. Total amount of all checks | 1. $ | 1. (E) | 1. $ | 1. Total Check Receipts |
|  |  | 1. Total amount of all cash and checks | 1. $ |  |  |  |
| 1. (Prerecord amount and initial the amount of change funds received) | | 1. Less startup change fund amount | 1. $ |  |  | 1. Initial upon receiving change funds |
|  |  | 1. Total net amount of all cash and checks |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Note |  | 1. ASB Bookkeeper |  |
| 1. Confirm that total “cash & coin” receipts equal total amount of all cash. | 1. (D) |  | 1. Initial |
| 1. Confirm that all check receipts match attached receipts. | 1. (E) |  | 1. Initial |
| 1. Confirm that all check payees individually match attached receipts. |  |  | 1. Initial |
| 1. Confirm that all receipt numbers are sequential, with none missing. |  |  | 1. Initial |

1. Follow up on ANY differences.

Cash Count form prepared by:

Signature, Title and Date

Cash counted by:

Signature and Date

Cash counted by:

Signature and Date

Verified by ASB Bookkeeper:

Signature, Title and Date

Submitted and Approved by:

Student Club Representative:

Signature, Title and Date

Club Advisor:

Signature, Title and Date

Principal/School Administrator:

Signature, Title and Date

Recorded in ASB Student Council Minutes on:

Date

Supporting documentation:

(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.

Completed tally sheet(s).