

## Cash Count

Date: \_\_\_\_\_

Fund Name: \_\_\_\_\_

Custodian: \_\_\_\_\_

Authorized Amount: \$ \_\_\_\_\_

### Currency:

Denomination	Quantity	Amount	Total
\$ 20.00 x _____ = _____			
\$ 10.00 x _____ = _____			
\$ 5.00 x _____ = _____			
\$ 1.00 x _____ = _____			

### Coins:

<b>Rolled:</b>	\$ 0.25 x _____ = _____	
	\$ 0.10 x _____ = _____	
	\$ 0.05 x _____ = _____	
	\$ 0.01 x _____ = _____	
<b>Loose:</b>	\$ 0.25 x _____ = _____	
	\$ 0.10 x _____ = _____	
	\$ 0.05 x _____ = _____	
	\$ 0.01 x _____ = _____	

### Reimbursement Voucher

Number	Date	Acct. Dist.	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### Expense Receipts (Not Vouchered)

Date	Description	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____

Deduct: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Funds Accounted for: \_\_\_\_\_

Funds Authorized: \_\_\_\_\_

Overage (Shortage): \_\_\_\_\_

This fund was counted in my presence and returned to me intact.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Count performed by: \_\_\_\_\_

Date & Time: \_\_\_\_\_