# ASB Cash Count

**Name of School:** ___________________________________________________

**Name of Club:** _____________________________________________________

## ASB Cash Count

**Fiscal Year:** _______________

**Name of person completing form:** _______________________________________________

**Date completing this form:** ________________

<table>
<thead>
<tr>
<th>(A) Denominations</th>
<th>(B) Number of Bills or Coins</th>
<th>(C) Total Amount Collected (A times B)</th>
<th>Totals from Receipts Adding Machine Tape</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pennies</td>
<td>.01</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nickels</td>
<td>.05</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dimes</td>
<td>.10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quarters</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Half dollars</td>
<td>.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dollar coins</td>
<td>1.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dollar bills</td>
<td>1.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Five dollar bills</td>
<td>5.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ten dollar bills</td>
<td>10.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Twenty dollar bills</td>
<td>20.00</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total amount of all cash</th>
<th>$</th>
<th>(D)</th>
<th>$</th>
<th>Total Cash Receipts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total amount of all checks</td>
<td>$</td>
<td>(E)</td>
<td>$</td>
<td>Total Check Receipts</td>
</tr>
<tr>
<td>Total amount of all cash and checks</td>
<td>$</td>
<td></td>
<td>Initial upon receiving change funds</td>
<td></td>
</tr>
<tr>
<td>(Pre-record amount and initial the amount of change funds received)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less startup change fund amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total net amount of all cash and checks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Note

Confirm that total "cash & coin" receipts equal total amount of all cash.
Confirm that all check receipts agree to attached receipts.
Confirm that all check payees individually agree to attached receipts.
Confirm that all receipt numbers are sequential, with none missing.

*Follow up on ANY differences.*

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**ASB Bookkeeper**

(D) Initial

(E) Initial

Initial

Initial

Initial

Initial
Cash Count form prepared by: ____________________________________________________________  

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: ____________________________________________________________  

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/sheets