

**DAILY CASH COUNT FORM**

**Beginning Cash Balance:**

Date: \_\_\_\_\_ Pennies  
\_\_\_\_\_ Nickels

Time: \_\_\_\_\_ Dimes  
\_\_\_\_\_ Quarters

Receipt #: \_\_\_\_\_

Verified: \_\_\_\_\_ Ones  
\_\_\_\_\_ Fives  
\_\_\_\_\_ Tens  
\_\_\_\_\_ Twenties  
\_\_\_\_\_ Total

Total Credit Card Purchases: \_\_\_\_\_

Total Credit Card Refunds: \_\_\_\_\_

**Total Credit Card Deposit:** \_\_\_\_\_

**Ending Cash Balance:**

Date: \_\_\_\_\_ Pennies  
\_\_\_\_\_ Nickels

Time: \_\_\_\_\_ Dimes  
\_\_\_\_\_ Quarters

Receipt #: \_\_\_\_\_

Verified: \_\_\_\_\_ Ones  
\_\_\_\_\_ Fives  
\_\_\_\_\_ Tens  
\_\_\_\_\_ Twenties  
\_\_\_\_\_ Fifties  
\_\_\_\_\_ Hundreds

Total Ending Cash: \_\_\_\_\_

Plus Checks: \_\_\_\_\_

Less Total Beginning Cash: \_\_\_\_\_

**Total Deposit:** \_\_\_\_\_

Cash Receipt Book Total: \_\_\_\_\_

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Supervisor Signature:** \_\_\_\_\_