

CASH VERIFICATION FORM



Date _____ Activity _____

Chairperson _____ Budget category _____

Coins	_____	X	.01	=	_____
	_____	X	.05	=	_____
	_____	X	.10	=	_____
	_____	X	.25	=	_____
	_____	X	.50	=	_____
	_____	X	1.00	=	_____

Total 1 \$ _____

Currency	_____	X	\$1.00	=	_____
	_____	X	\$5.00	=	_____
	_____	X	\$10.00	=	_____
	_____	X	\$20.00	=	_____
	_____	X	\$50.00	=	_____
	_____	X	\$100.00	=	_____

Total 2 \$ _____

Checks How many? _____ (Attach itemized list) **Total 3** \$ _____

Cash Box Reimbursement (change/petty cash) **Total 4** \$ _____

Grand Total (Total 1 + Total 2 + Total 3 - Total 4) \$ _____

For Membership Dues Collection Only	
# _____ members @ \$ _____ (dues) = \$ _____ + donations \$ _____ - petty cash \$ _____ = \$ _____	
Please note: This total should equal the above Grand Total.	

Verification: (signature of the two counters) *The undersigned certify these funds were received and properly accounted for.*

Signature _____ Signature _____

For Treasurer's Use Only	
Amount received: \$ _____	Date received: _____ Date deposited: _____
Treasurer's Signature _____	Date _____
Note: After the treasurer verifies and deposits funds, he or she should provide a copy of the deposit slip to the person who submitted the funds.	