



# SHERIDAN SCHOOL STUDENT ACTIVITY CASH BOX REQUEST & RECONCILIATION WORKSHEET

*Submit to the Business Office 5 days prior to the event.*

Activity \_\_\_\_\_ Club/Class \_\_\_\_\_

Date of Activity \_\_\_\_\_ Advisor(s) \_\_\_\_\_

At the beginning of an activity, please count the starting monies to verify the initial amount. Upon completion of the activity, count all monies, complete the following summary and sign it. Return the cash box and all monies immediately after the activity to the person in charge of the activity.

**Number of Cash Boxes Requested** \_\_\_\_\_

**Date & Time Required** \_\_\_\_\_

Please specify the breakdown of paper & coin currency you are requesting.

Den	x	Qty	=	Amount
\$20	x		=	
\$10	x		=	
\$ 5	x		=	
\$1	x		=	
Quarter roll (\$10.00)	x		=	
Dime Roll (\$5.00)	x		=	
Nickel Roll (\$2.00)	x		=	
Penny Roll (\$0.50)	x		=	
		<b>TOTAL</b>		

Requested by: \_\_\_\_\_

Counted & Received by \_\_\_\_\_

## FINAL SUMMARY

TOTAL CASH \$ \_\_\_\_\_

TOTAL CHECKS \$ \_\_\_\_\_

SUBTOTAL \$ \_\_\_\_\_

Minus- Beginning Bank <\$ \_\_\_\_\_>

**BALANCE** \$ \_\_\_\_\_

Please fill out the information on the front of the tamper proof deposit bag. Place all monies and this worksheet inside and seal the bag.

Signature \_\_\_\_\_

Comments:

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Office Verification \_\_\_\_\_

Office Use Only:

Check Number \_\_\_\_\_ Date: \_\_\_\_\_

SBA Fund: \_\_\_\_\_ Clerk: \_\_\_\_\_