

# Cash Count Sheet

Department: \_\_\_\_\_

Date: \_\_\_\_\_ Page: \_\_\_\_\_ of \_\_\_\_\_

**CASH**

Hundreds	_____	x \$100.00	_____
Fifties	_____	x \$50.00	_____
Twenties	_____	x \$20.00	_____
Tens	_____	x \$10.00	_____
Ones	_____	x \$1.00	_____
Half Dollars	_____	x \$0.50	_____
Quarters	_____	x \$0.25	_____
Dimes	_____	x \$0.10	_____
Nickels	_____	x \$0.05	_____
Pennies	_____	x \$0.01	_____
		Total	_____

Customer Name	Check#	Amount

Note:

Total \_\_\_\_\_

\_\_\_\_\_

Signature