

**NORTHSHORE SCHOOL DISTRICT
CASH RECONCILIATION**

SCHOOL _____ EVENT _____ DATE _____

Bills	#	Amt.
\$100		
\$50		
\$20		
\$10		
\$5		
\$2		
\$1		
Coins		
\$1		
0.50		
0.25		
0.10		
0.05		
0.01		
Checks		
TOTAL		

Total \$ _____

Beg. Change Fund \$ (_____)

Final Total \$ _____

Deposit Total \$ _____

Over/Short ** \$ _____

Ticket Seller/Event Supervisor Signature

Office Manager/Bookkeeper Signature

**** Explanation** _____
