



PMS Music Boosters Cash Accounting form

Event _____ Date _____

Chairperson _____ Phone # _____

Person Completing Form _____ Phone # _____

Please ensure that 2 people count the money for reliability purposes, both counters sign below

Cash:

<u>Bills</u>	<u>#</u>	<u>Amount</u>
\$100		
\$50		
\$20		
\$10		
\$5		
\$2		
\$1		
Total		

Total Bills: _____

<u>Coins</u>	<u>#</u>	<u>Amount</u>
Dollar		
50 Cent		
Quarters		
Dimes		
Nickels		
Pennies		
Total		

Total Coins: _____

Total Cash: _____

Total Checks: _____

Counter's Signature: _____ Date: _____

Counter's Signature: _____ Date: _____

Received Treasurer: _____ Date: _____