

**DALLAS SCHOOL DISTRICT NO. 2 – STUDENT BODY ACTIVITY FUNDS
CASH RECONCILIATION**

EVENT DATE	ASB CLUB NAME	EVENT OR PURPOSE	
CURRENCY	AMOUNT	COIN	AMOUNT
1.00		.01	
2.00		.05	
5.00		.10	
10.00		.25	
20.00		.50	
50.00		1.00	
100.00		.25 roll	
TOTAL		TOTAL	
# OF CHECKS		CHECK TOTAL	
**LIST EVENT ON CHECK MEMO LINE		GRAND TOTAL	
Worker Name		Person who counted	
Worker Name		Supervisor printed name and signature	
THE MONEY MUST BE COUNTED. PLEASE ALLOW TIME TO COUNT AND COMPLETE THIS FORM. TURN CASHBOX OVER TO ADMINISTRATOR. THANK YOU.			
DO NOT COMPLETE THIS SECTION - OFFICE USE ONLY			
CURRENCY TOTAL			
CHECK TOTAL			
COIN TOTAL			
TOTAL CASH			
LESS BEGINNING CASH <small>(Amount pre-filled by bookkeeper; initialed by requestor)</small>			
TOTAL EVENT PROCEEDS (DEPOSIT)			
CONCESSIONS DISTRIBUTION (if applicable)			
CANTEEN/BOOSTER CLUB			
ASB CLUB			
BOOKKEEPER/OFFICE MANAGER SIGNATURE			