

Cash Receipt Form

Event Name: _____

Event Date: _____

Start-Up Money Received: \$ _____

100's \$ _____

50's \$ _____

20's \$ _____

10's \$ _____

5's \$ _____

1's \$ _____

Coins \$ _____

Cash Total: \$ _____

Check Total: \$ _____
(See Check Register)

Sub-Total: \$ _____

Less Start-Up Money: \$ _____

Event Profit: \$ _____

Signatures: _____

Committee Chairperson

Treasurer

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