

DAILY CASH REPORT

Date: _____ **Register #** _____ **Loc. #** _____

1. Register Reading (Z-Tape)	\$	_____
2. Overrings	\$	_____
3. Total Register Sales, including tax		_____
Line 1 minus line 2		\$ _____
4. Cash Count (currency, checks)		\$ _____
5. Change Bank		\$ _____
6. Sales Tax from line 3		\$ _____
7. Total to Deposit (Line 4 - Line 5 and 6)		\$ _____
8. Cash Purchases (Paid Outs)		
.....	\$	_____
.....	\$	_____
.....	\$	_____
.....	\$	_____
9. Total Cash Purchases		\$ _____
10. Total Register Receipts -Tax (Line 7 + Line 9)		\$ _____
11. (Line 10 + Line 6)		\$ _____
12. Line 11 - Line 3 (Over and Short)		\$ _____

REMARKS (weather, special events, reason for shortage, etc.):

NOTE: ATTACH Z-TAPE AND ANY OVEERRING SLIPS TO REPORT